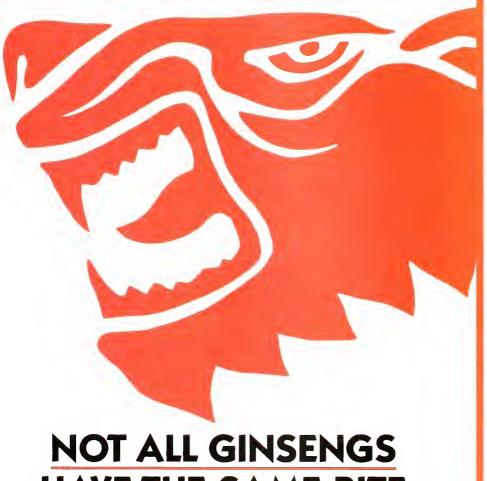
the newsweekly for pharmacy

August 11, 1990



HAVE THE SAME BITE

Red Kooga Ginseng gets its teeth into over 70% of the ginseng market. Making it far and away the biggest brand you can stock. Manufactured from only the finest Korean ginseng, it gives the ideal daily intake (600mg) in one dose and is available

in a range of attractively packaged

And there's a full point of sale package available to add even more bite to your sales.

Red Kooga. The ginseng.





Council warns Boots again on homes

Odd to replace Rhodes at Society

MeReC: advising on prescribing

Pharmoney offers cheap investment capital

Eyclear Greme Rinse Prescribing Information
Presentation Each 59ml bottle of Lyclear contains Prow/w permethrin plus 20% with inspiration a creme-time base. Uses For the treatment of head louse (Pediculus humanus capitis) infections. Dosage and Administration. Multistand children were 2 years. Shampoo that as normal, rinse and towel dry. Shake the bottle thoroughly and apply enough Exclear to saturate the han and scalp. Leave on the hard to 10 minutes, then time thoroughly with water and dry in the usual wav. Contra-indications, warnings, etc. Contra-indications: Hypersensitivity to permethrins, other synthetic pyrethriods, pyrethrins or chrysanthemoms. Precautions: For external use only. Wear gloves for multiple applications. Only use in children under 2 years under methral supervision. Use in pregnancy only if potential benefit onlivegibs the possibility of unknown risks. Sides and adverse effects: Adverse reactions are infrequent, mild and transitory, and are usually also symptoms of head louse infection. Basic NHS Cost £1.08. Legal Category [P]. Further information available on request. The Wellcome Foundation Ltd., Crewe, Cheshire CW1 IUB. Lyclear is a Trade mark.



LYCLEAR Permethrin

A single 10-minute treatment for head lice.



*99% overall cure rate after one week.

Eradicating head lice hasn't always been easy or pleasant. But now Wellcome presents a new pediculicide. It's called Lyclear.

Based on the tried-and-tested permethrin compound, new Lyclear is highly effective as a single application creme riuse, and used as easily as a normal hair conditioner.

In fact, just one ten minute Lyclear treatment is sufficient to kill lice and eggs, with the comparative effectiveness of either a 2 or 12 hour malathion application. What's more, Lyclear's strong residual capacity can protect against reinfestation for as long as 6 weeks after use.

Although highly effective, Lyclear has a

pleasant smell, is unlikely to cause eye irritation, has low potential for toxicity or allergic reactions, and being biodegradable is environment and user friendly.

With its recognised cosmetic advantages together with its proven clinical potency, Lyclear is an ideal head lice treatment for every member of the family.

Lyclear is a head lice treatment you can confidently recommend to be quick, effective, and pleasant to use.

NEW

Kills head lice in just one 10-minute application.

DOLLAR

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Advertisement Manager:

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Production: Shirley Wilson Publisher: Ronald Salmon, FPS Director: Felim O'Brien

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...but no single element of campaign substantiates a complaint of misconduct

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Accurate interpretation of results difficult and counselling lacking

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his week the Consumers' Association, in its Which? Way to Health magazine, criticises the quality of some of the on-pack information the public is given about medicines. The spur was the accidental overdose of paracetamol taken by a woman earlier this year when using a cocktail of cold remedies, allied to the draft European Commission Directive on consumer medicine information. The Association says it would like more and clearer information available with medicines. Few would argue with the sentiment but determining both the information required and deciding where it goes will prove more difficult.

At present the UK regulations ensure that all the essential information to guide purchase and safe use of OTC medicines is duplicated on both the outer and inner packaging. Any package leaflet can contain additional but non-essential information. The EC draft switches the emphasis away from the outer pack and container to the inpack leaflet as the catch-all. But medicine leaflets are easily lost. The PAGB is already fighting this proposal and the Consumers' Association's stance will give it further ammunition. A Euro-pack common to all, say, but with language inserts for each member country where that pack is distributed, would be disastrous.

A warning on all OTC medicines to consult a pharmacist before use if the patient is taking either another OTC medicine, a prescription medicine, or is pregnant might take the heat out of most of the Consumers' Association arguments. Medicine labels can never be comprehensive and the involvement of a health professional in such instances is the obvious answer. Indeed the National Pharmaceutical Association made a similar call last week.

Prescription labels, too, come under Consumers' Association scrutiny as carrying least information of all. The Royal Pharmaceutical Society's mandatory warning labels mean that essential information not necessarily relayed by the doctor during the patient's consultation is included on the label. But perhaps now is the time for the British Medical Association to insist that full dosage instructions appear on all scripts regardless of patient familiarity with the medicine. In this day and age ut dicte is not good enough. The pharmacist with a PMR system can fill in the gaps where necessary but he has not the time to bail out the doctor on every prescribed medicine.

Boots get second caution over homes

The Royal Pharmaceutical Society's Council has decided that a letter should be sent to Boots pharmacy—superintendent expressing concern about aspects of the company's campaign on pharmaceutical services to residential homes and cautioning him that Council would expect closer central control of the arrangements in the future.

After further discussions at this month's meeting, the Ethics Committee decided that no single element, nor indeed the campaign

Exosurf Neonatal gets US licence

A product for the prevention and treatment of respiratory distress syndrome (RDS) has been approved by the US Food and Drug Administration. Exosurf Neonatal, a synthetic surfactant developed and manufactured by Burroughs Wellcome, is the first product of this type to get full marketing approval in the US. An application for registration has also been submitted in the UK.

RDS, the leading cause of death and disability among premature infants, is caused by a deficiency of surfactant, a lubricant which prevents the alveoli of the lungs collapsing when the infant inhales. Treatment has routinely been by mechanical ventilation. Around 50,000 premature babies in the US develop RDS every year, and approximately 10 per cent of these die.

According to the company, "the availability of the new therapy will mean the survival of thousands of premature infants."

Exosurf Neonatal, a proteinfree surfactant, is indicated for preventative treatment in infants weighing less than 3lbs at risk of developing RDS and in infants weighing more than 3lbs who show evidence of lung immaturity. It can also be used for the rescue treatment of infants who have developed RDS. It is supplied as a sterile, freeze-dried powder, for reconstitution with sterile water. The resulting liquid is then administered through the ventilator. as a whole to date, would substantiate a complaint of misconduct. However the Committee, and subsequently the Council, recognised that a series of relatively minor incidents could lead to a breach of the Code of Ethics and decided that a cautionary letter should be sent to the superintendent pharmacist.

Having been told of the need for central control and strict compliance with all ethical guidelines, he will be warned that the Council does not expect to receive any substantiated complaints of initiatives that appear to breach the Code of Ethics and which could lead to an allegation of misconduct.

The Council refuted suggestions made in the pharmaceutical Press and in letters that the Council adopted a different approach to Boots thanit would have to proprietors of individual pharmacies or smaller chains. A highly visible pronotion conducted by a national multiple was bound to attract more attention than similar schemes on a local level, but the Council applied the same criteria in considering both cases.

ABPI to watch for Government NHS pledges

The pharmaceutical industry will remain alert to ensure that pledges made by Government ministers on the future availability of medicines under the planned health service changes are redeemed in practice, according to the Association of the British Pharmaceutical Industry's president, John Farrant.

While the ABPI will not oppose a reasoned attempt to obtain a more cost effective environment, a truly cost effective NIIS will not be achieved by reducing the nation's medicines bill, says Mr Farrant in the ABPI's annual review. Despite Government assurances the Association believes that safeguards should be enshrined within legislation.

The other major issue over the past 12 months has been the question of patent life restoration. Mr Farrant points out that with the increased time taken for medicines to reach the market the period of patent protection has been reduced by about a third.

The ABPI supports the European Commission's moves to restore the patent life to at least 16 years from the date of marketing approval, and urges the UK Government to support this initiative.

Looking to the future, the ABPI predicts a number of changes as a result of 1992 and the single European economy, including new labelling proposals and package leaflets, advertising controls, the licensing and control of wholesale distribution, and

defining the legal status of medicines throughout the Community.

A centralised European Medicines Agency consisting of a reinforced Committee on Proprietary Medicinal Products (CPMP) supported by a technical secretariat, has also been proposed, says the report. The ABPI is concerned that the system could be unnecessarily cumbersome and needs to allow for an adequate appeals procedure.

The Association also voiced concerns over the Government's plans to review the ownership of patient data and records held within NHS hospitals and by GPs. The ABPI is concerned that if the information is considered to be the property of family practitioner committee's, then it would affect the right of doctors to reveal even anonymous information relating to their patients. This could have serious implications for the conduct of both clinical trials and post marketing safety checks.

The report predicts that the number of science graduates over the next five years will remain static while industry demand is set to increase. The ABPI has launched a programme under the control of a newly-appointed science education co-ordinator aimed at attracting children into science subjects.

The ABPI's guide to graduate careers in the pharmaceutical industry, launched in October 1989, has been well received, says the report.

Call for better GP liaison

"Until you work directly with others you cannot be fully aware of their expertise" according to Dr Zermanski, part-time medical adviser to the Leeds Family Practitioner Committee.

Speaking at the Young Pharmacists Group Northern regional conference, Dr Zermanski felt there was currently almost no liaison between doctors and pharmacists, bar "confrontational correctional intervention" over incomplete or incorrect prescriptions.

Structured integration during training and at the postgraduate continuing education level would facilitate a greater appreciation of the two profession's roles, said Dr Zermanski. He advocated a 'team approach'', not only between doctors and pharmacists but also with related medical professions such as nurses, health visitors and social workers.

Pharmacists should be allowed limited access to patient's notes, particularly the areas relevant to the drug therapy, said Dr Zermanski. He believed that the way in which pharmacists practised their profession significantly affected the way that NHS resources coped with the demands placed upon it.

He quoted a survey in which people kept a diary of "symptoms". It highlighted that only 10 per cent of symptoms were taken to a doctor. Even a small shift in patient behaviour in this area could significantly affect the doctors workload, he said. A larger shift either way could result in the medical profession either being swamped or left with nothing to do.

Otrivine reminder

Dispersa UK are reminding pharmacists of the dosage recommendations for Otrivine Antisin eye drops. For adults, including the elderly, and children over five years the dose is one drop two to three times a day.

The product should not be used in children under five, and is not recommended for patients wearing contact lenses.

The remainder follows a query to the NPA from a pharmacist who found a "new" pack with an outdated leaflet.

ABPI Code: complaints up

Complaints regarding the legibility of prescribing information and the conduct of medical representatives have been highlighted by the Association of the British Pharmaceutical Industry's Code of Practice Committee in its annual report.

According to the Committee's

According to the Committee's chairman Philip Cox, 73 complaints were received during 1989 compared to only 60 in the previous year. Of the 66 cases reviewed, the Code was considered breached in 47.

The legibility of prescribing information is one area that arises repeatedly, says the report. The Code requires it to be clear and legible and that does not just relate to the type size. The length of the lines, the spacing, headings, and whether the information is superimposed over a background colour are all considered. "It is an area where the industry receives justifiable criticism which it could easily avoid," concludes the report.

The report highlights a 'disturbing increase in complaints regarding the conduct of medical representatives'. A common factor in many cases was that the representatives involved were relatively new to the industry. The Committee stresses that companies must ensure field forces have a full understanding of



the Code and are briefed on how to deal with commonly occurring problems.

As in previous years, many of the complaints were from the healthcare professions but 27 complaints were received from other pharmaceutical companies. As a result of this, the Committee introduced changes in April 1989 so that published reports will name the complainant, regardless of whether or not a breach was established. If the Committee considers a complaint to be trivial, then this will be noted in the report.

'Not tested on animals' claims are disputed

Difficulties are arising over "not tested on animals" claims for products because of the way this statement can be defined.

Body Shop has recently been prohibited by the Higher Regional Court in Dusseldorf, West Germany, from making the claim to customers that "We test neither our raw materials nor our end products on animals". Costs for the appeal were awarded against Body Shop. The appellant in the case was the Society Against Evil Practices in Commerce and Trade, Cologne.

Body Shop opened a shop in Dusseldorf on August 3, 1989, and a leaflet they distributed at the time promoting the shop prompted the legal action. The way the claim was made was seen to disparage other manufacturers and not to be justified in its general scope.

It was likely to lead to the impression and the so called traditional cosmetics industry did not take steps to prevent or reduce animal tests. It also failed to acknowledge that other suppliers increasingly were avoiding animal testing.

Last month in the UK the Cosmetic Toiletry & Perfumery Association discussed the many different parameters in use to justify "not tested on animals" claims. The most common definitions used were: the finished product not tested manufacturer; finished product not tested and ingredients not tested by manufacturer or supplier of raw materials for five years; finished product not tested and ingredients not tested by manufacturer or supplier of raw materials since 1976; and finished product not tested and ingredients were available for use in cosmetics in 1976 or earlier.

The CTPA says it will keep members informed on moves towards harmonisation of the criteria.

Which? criticises OTC medicine labels

The quality of information the British public gets about medicines could be improved, according to a report in the Consumers' Association publication 11/11/12 Way to Health. It would like to see warnings and full instructions about the safe use of all medicines required by law. It also suggests that the Department of Health do more to research into the wording which people understand best.

The Association's investigation was prompted by the death of a woman after taking a combination of cold remedies and painkillers, all containing paracetamol. A study of the labelling of cold remedies found that Night Nurse and Day Nurse had the best warnings about the risk of taking too much paracetamol.

The Unichem Hot Lemon treatment carried a clear "contains paracetamol" flash, while the manufacturers of Lemsip and Beechams Hot Lemon were reported as saying they planned to improve their warnings later this year.

A survey was also conducted into the labels on 56 different brands of painkillers and found only one in three ibuprofen products and three in 26 aspirin products carried warning about their use in pregnancy.

The article also details the latest European Commission's proposals regarding the labelling of medicines which it concludes "will improve the British situation in some respects — but they are

not perfect." The proposed use of information leaflets inside packs does not meet with approval. "Leaflets can get lost or discarded and won't be read by everyone", the Association says. The vital information must be on the outside of the pack enabling people to select the appropriate over the counter medicine.

The Consumers' Association also comes out in favour of original pack—dispensing. 'At—the moment, patients who get brown pill—bottles—get—the—poorest information of all,' it says. It also calls for a change in the law to allow pharmacists to dispense the nearest quantity to that ordered by the doctor.

Commenting on the article, the Proprietary Association of Great Britain's Sheila Kelly, points out that if the Medicines Control Agency required a warning on pregnancy to appear on an OTC medicine, then that warning would have to appear. However, some companies do put a blanket warning on all their products and this can lead to discrepancies in labels, she says.

Ms Kelly points out that in some cases aspirin in pregnancy is beneficial. She says that public awareness of the dangers of all medicines in pregnancy means that pregnant women effectively do not buy OTC medicines but consult their doctor instead. Ms Kelly felt the main thrust of the article was the problems with the EC labelling proposals with which the PAGB wholeheartedly agreed.

Council issues guidance on Chemcard test kits

The Royal Pharmaceutical Society's Council agreed at this month's meeting to issue guidance on the use of the Chemcard cholesterol testing kit. (see hox)

The Council also approved a number of comments to be made in response to a report on the cost effectiveness of blood cholesterol testing, produced by the Standing Medical Advisory Committee.

The community pharmacy subcommittee expressed concern at the restrictive recommendation that all testing should be under medical supervision and the report should distinguish between testing in a pharmacy and a health food shop. Testing through pharmacies was cost effective to the NHS because patients bore charge themselves. Pharmacists supported dietary treatment of high cholesterol levels and were certainly not involved in testing because of the effect it might have on prescription numbers.

OPD progress Council agreed to ask the Department of Health to convene a meeting of interested parties to further implementation of original pack dispensing. A letter from the Minister for Health, Virginia Bottomley, had stated that agreement between all parties was going to be difficult to reach, so a voluntary agreement seemed unlikely. Any statutory controls on pack sizes would be subject to consultation European procedures because of the possible impact on the free movement of goods. "If suitable European standards are prepared for pack sizes we would of course look at such proposals to see what progress could be made,' said. Council reaffirmed its view that the provision of patient package inserts, as to be required by the European Community, would be extremely difficult in the absence of OPD.

Services to hospices Council agreed that the Society should join with the Pharmaceutical Services Negotiating Committee in producing a document on the services offered to hospices by community pharmacists.

End of Pins Council decided that the Society's computer-based Pharmacy Information and News Service should cease operation from December 31. The decision was made with regret because the service was not financially viable. The Society would retain its support in principle for electronic information services and might

enter the field again in due course. Computerised records Council agreed to seek changes in legislation to permit the use of computerised prescription book records, subject to appropriate measures to safeguard the integrity and accessibility of data.

Community Care Council decided to write to the Secretary for Health, Kenneth Clarke, expressing concern at the delay in implementing the community care aspects of the NHS and Community Care Act. Council also agreed to ask the DoH to establish a formal procedure for communicating to community pharmacists information about selected patients discharged into the community on complex treatment regimes.

Complaints procedures Council is to ask the DoH to inform the Society whenever a complaint about a pharmacist is found proved by a family practitioner committee or whenever an FPC decided that a case was not within its remit or competence.

The Council of the Royal Pharmaceutical Society has sought independent advice on the Chemcard cholesterol testing kit as a result of which the following guidance is issued:

On the information currently available, Council has concluded that the Chemcard kit is inappropriate for home testing because of the importance attached to counselling at the time the results of the test are known. It was also felt that accurate interpretation of the results could be difficult for a lay person.

Thus on the information presently available to Council it is unable to endorse the sale of the kits from pharmacies to the public for home use. Pharmacists who wish to use the kits as a screening tool within the pharmacy are advised by the Council to follow the first sentence in Paragraph 1 and Paragraphs 4 to 13 inclusive of the cholesterol testing guidelines published in December 1988.

The Council has asked the NHS procurement directorate to undertake testing of the Chemcard as soon as possible and the whole matter will be considered further by the Council when the results of these tests are available.

Government bails out GP software

Faced with the prospect of general practitioners not having suitable computer software to become fundholders under the NHS reforms, the Government has stepped in with a cash offer to encourage suppliers to develop a suitable package.

Junior Health Minister Stephen Dorrell announced last Monday that major computer suppliers are now expected to be able to produce suitable software in time for GP fundholding to begin from next April.

He said that four companies — AAH-Meditel, AMC, Genisyst, Update and Vamp — had looked at the problem constructively. The

Government had offered the

companies funding towards the cost of development in return for a share of any profits.

Earlier, the suppliers had indicated that they would pull out of developing the software because the number of GP practices that were potential customers had shrunk too much from an original 950.

The costs of developing a suitable package has been estimated at more than £250,000. Under 400 practices are expected to go forward to become fundholders. They will directly purchase hospital care for the patients on their lists.



'Well? Speak up man! Is it safe?'

Daily Mail cartoonist Mac was inspired to produce this drawing which appeared on August 2, following an editorial on the NPA's proposed environmental pollution testing service. The article outlined the proposal to test seawater and other samples, and dismissed the National Rivers Authority's objections. NPA business services manager John Goulding commented: "It seems to have struck a chord with the public. It is too early to assess the interest from pharmacists nationally"

Potter's rebut attack on Valerian

A Radio 4 "You and Yours" programme which singled out valerian to attack the use of herbal medicines has been dismissed as "scaremongering" by Potter's Herbal Supplies.

The company says the programme's claims were not backed up by factual evidence, but were based on one isolated case and a discredited report in a medical journal. The company's view is that there have never been tougher controls on herbal medicines. It supports reviews of licensed medicines, including herbal medicines.

Potter's sales director David Hampson said: "It is particularly disturbing that valerian should be singled out when we are all aware of the well-documented dangers associated with benzodiazepine-

based tranquillisers.'

No DoH cash for ADR Bulletin

The Department of Health has withdrawn its sponsorship of copies of the Consumers' Association Adverse Drug Reaction Bulletin for GPs. Pharmacists will still receive their copies on a joint subscription with the Drug & Therapeutics Bulletin via the NPA.

The DoH says research shows the *Bulletin* was not meeting the needs of GPs. Editor Professor D.M. Davies, formerly director of the Northern Regional Clinical Pharmacology Unit, told *C&D* the *Bulletin* would continue to be published. It had always had a significant subscriber base, outside of the copies provided for GPs.

The Acceptable Daily Intake (ADI) of the high intensity sweetener Sunett has been increased by the Joint Expert Committee on Food Additives of the WHO and FAO. The ADI has been increased from 0-9 to 0-15mg per kg body weight. At the upper limit this represents a daily intake of over 200g of sugar, about double the average daily sugar consumption. Sunett, the trade name of acesulfame K, made by Hoechst, has been approved in the UK since 1983. It is used in a number of soft drinks, foods and pharmaceutical products.

TOPICAL REFLECTIONS by Xrayser

All very good, but...

The Royal Pharmaceutical Society working party's proposals on dispensed medicines labelling have been generally well received, and though I do not like the word "put", instill is an instruction that should have gone a long time ago. I would, however, retain "insert" (or perhaps "push"?) for pessaries and suppositories, and would strongly suggest "use" instead of "take" for inhalers.

I can understand the problems in formulating suitable semantics, and the "fly on the wall" must now be better educated, but I regret the omission of any recommendations on paracetamol-containing drugs. I repeat my earlier suggestion that an extra warning label be included on all dispensed preparations containing paracetamol: "This medicines contains paracetamol. Do not take any other medicine containing paracetamol without medical advice".

UBR is fairer

The community charge is a debateable replacement for the domestic rates and has been introduced with characteristic ineptitude and insensitivity by the Government. The uniform business rate, however, is undoubtedly fairer than its predecessor despite the initial problems of change which are primarily a function of the delay in revaluation.

I am certainly much happier being able to predict the level of my rates commitment and the NPA should be supported in its efforts to aquaint all political parties of our views. As a business rate payer I have no vote and I have always resented being held to ransom by my local council, for political ends.



Chemex-ho!

Chemex is almost here. Sceptical at first, this has become an annual event that I cannot now miss. It is the shopwindow for all things pharmaceutical and under the benevolent sponsorship of C&D continues to expand. I originally questioned why it was held in September and not June, which would much better suit my Christmas buying, but in hindsight Christmas purchases have become less important relative to the total business

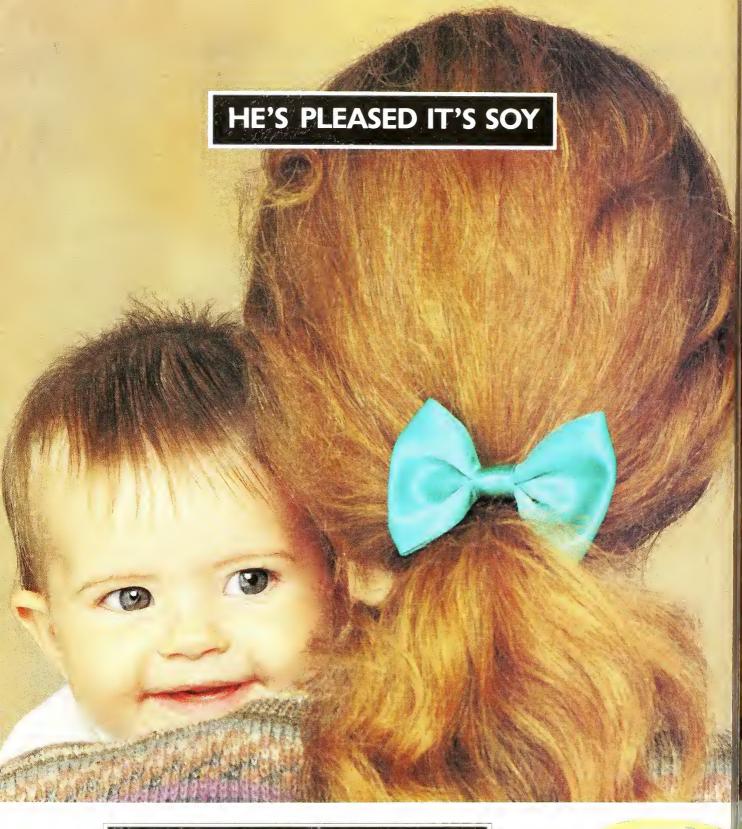
management for the whole year. The gift market is huge, as shown by the Spring Gift Fair at Birmingham's National Exhibition Centre. The small specialist pharmacy only gift fair cannot compete for

the serious buyer.

Chemex has evolved into a unique exhibition and I look forward to being able to see the latest innovations and renewing old aquaintances. This year I must come down off my uncomfortable fence and seek a comprehensive patient medication record system. The commercial and professional advantages can no longer be ignored and despite my eternal criticism of the Department of Health's parsimonious attitude, I must invest for the future now. I would like to incorporate electronic point of sale facilities as well but whether it is best to tackle the two problems separately or as an integrated package is a question which Chemex should help answer.

This year I have decided to take Tottie, my head sales girl, with me. A two pronged attack should allow me to concentrate on the technology while Tottie handles the latest for the counter. She normally complains that I am a sucker for a pretty face, so we will see whether she can resist all those positive business incentive schemes, designed to improve my business but which may be dangerous for the unwary who become

over ambitious!



WE'RE PLEASED IT'S NOW IN NEW-LOOK PACKS

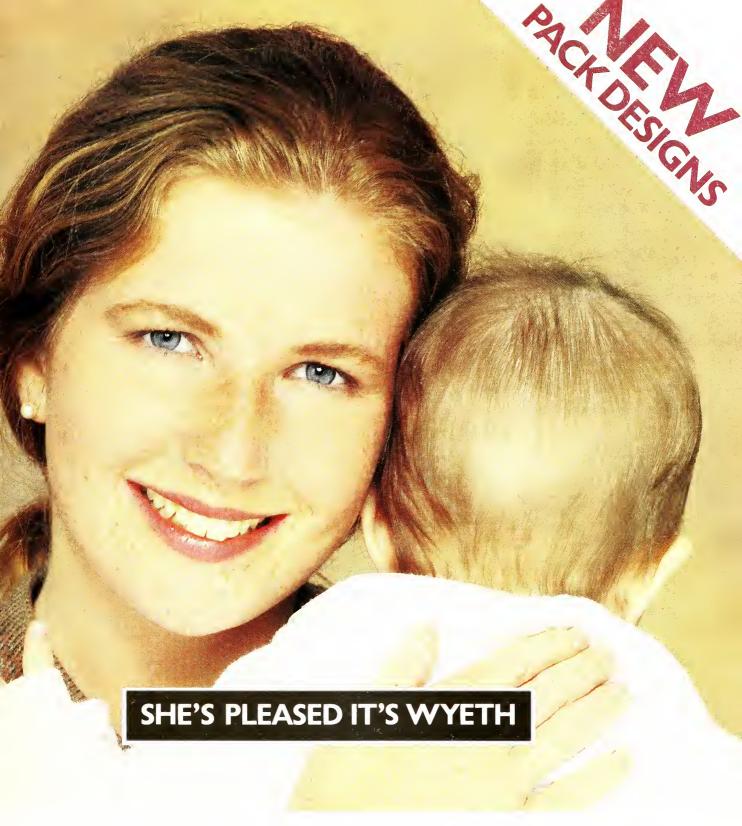
Cow's milk intolerance is no fun, whichever way you look at it.

So, as infant formula specialists, we're dedicated to making sure Wysoy* provides the quality solution.

Now we're pleased to announce the latest result of our commitment - the new-look Wysoy packs. These have been designed to bring greater reassurance to your customers. Their new easy-to-follow graphics and instructions explain more clearly than ever what Wysoy is for and how to make up feeds.

So now your customers can make a well-informed choice every time.





Wysoy has been the most widely prescribed and recommended soy formula since its introduction ten years ago. It now accounts for two out of every three scripts in its soy sector. And every one brings potential new business to the pharmacy and the baby fixture.

So why change the packs?

Our research shows that mothers trust Wysoy's long record of quality and safety. Mothers also say they feel reassured to know that Wysoy comes from Wyeth Nutrition. So, the new packs reflect clearly that Wysoy is part of the SMA family.

One thing which stays unchanged of course is Wysoy's tried and trusted formula. Now, with its vegetable fat blend, we're pleased to say that Wysoy is the complete solution to cow's milk intolerance for even more of your customers.

IMPORTANT NOTE

Breastmilk is best for babies. Wysoy milk-free formula is intended to meet the nutritional needs of infants and children who are allergic to cow's milk protein or intolerant to lactose. Professional advice should be followed.



- The No.1 Soy Formula.

COUNTERPOINTS

Denorex shampoo makes its UK debut

Whitehall Laboratories are launching Denorex anti-dandruff shampoo, a brand which they say is one of America's best selling medicated shampoos. They claim it has "significant product benefits" over the brand leader in this sector in the UK.



Formulated with coal tar and menthol, Whitehall say that Denorex clears dandruff, stops itching, and can be used by people suffering from skin conditions such as psoriasis and seborrhoeic dermatitis.

And it can also be used as a "cosmetic-style" shampoo for regular use, says the company. It has a herbal fragrance and has conditioning ingredients which are said to leave hair in glossy and shiny condition.

Denorex (125ml £2.49) will be available exclusively in pharmacies. Whitehall are supporting the launch with a consumer advertising campaign, which is expected to be worth some £500,000.

Britain's five million dandruff sufferers will be targeted with full

sufferers will be targeted with full colour ads in up-market women's and general interest magazines on

a continuing basis.

This campaign is expected to run until the middle of next year. Whitehall Laboratories Tel: 071-636 8080.



Topol smokers gel comes to the UK

Dep UK have introduced Topol Plus, a mint flavoured gel toothpaste especially for smokers. The product also contains zantrate, which is said to help freshen the breath.

According to the company, there are 15 million regular smokers in the UK, and while tooth powders are effective in

keeping teeth clean they can be a little abrasive and do not necessarily freshen the mouth.

Topol Plus gel (50ml £1.29) also contains fluoride and helps prevent the build-up of plaque, say Dep. It is packaged in bright green striped boxes, designed to be eye catching on the shelf. *Dep* (*UK*) *Ltd. Tel:* 0753 820743.

10-10 discounts

AAH Pharmaceuticals' customers can take advantage of an "August special offer" promotion on 10-10 contact lens products.

Products featured in the AAH promotion are the 10-10 rinsing and neutralising solution and the 10-10 cleansing and disinfecting solution.

For the promotion, the trade pack of twelve 10-10 cleaning and disinfecting solutions has been reduced from £27.60 to £24.84 and the trade outer of twelve 10-10 rinsing and neutralising solutions has been reduced from £39.36 to £35.16. AAH Pharmaceuticals Ltd. Tet: 0928 717070.

Repack for Sanatogen

Repackaged Sanatogen natural cod liver capsules 300mg are coming in-store, in packs which bring them in line with the liquid and powder originals black and yellow packs.

New pack sizes are 90s (£1.99) and 180s (£3.49). The old sizes (60s and 120s) remain. Consumer Health. Tel: 0509 611001.

A consignment of Dettol liquid with a value of over \$25,000 has been donated by Reckitt & Colman to assist victims of the earthquake in Iran. Reckitt & Colman Pharmaceuticals. Tel: 0482 26151.

New look Bronnley shower gel

Bronnley have relaunched their shower gel with new packaging and a new formulation.

The product has been relaunched as a moisturising shampoo and shower gel (250ml £3.50). It has new packaging to bring it in line with the other products in the range as well as a new look label to give a "softer, more feminine appeal", says the

Moisturising shampoo shower gel comes in five fragrances — English fern, forget-me-not, rose geranium, camellia and white iris. H. Bronnley & Co Ltd. Tel: 0280

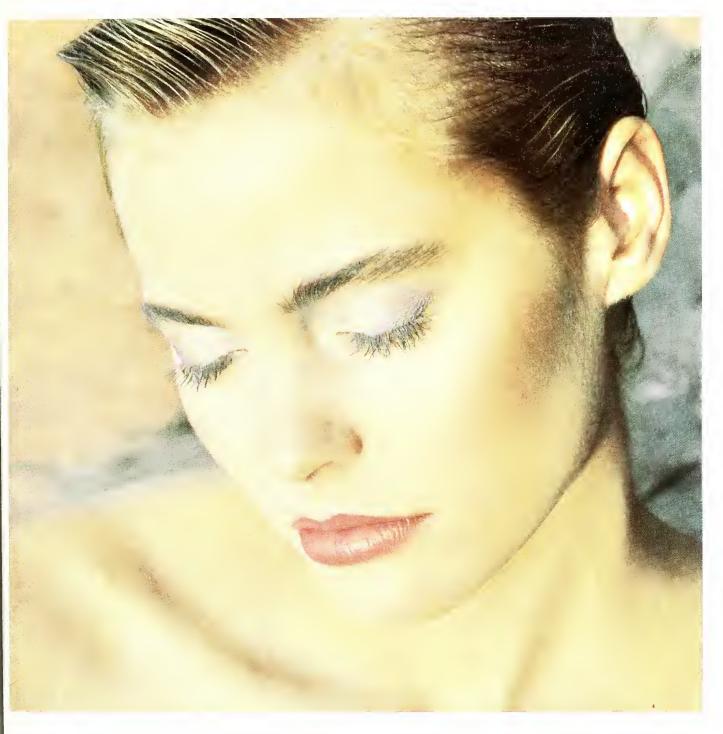
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Hermesetas

The Jenks Group are supporting their Hermesetas range with a new microwave recipe booklet. "Sweet wave" features

"Sweet wave" features Hermesetas Sprinkle Sweet and comprises 24 microwave recipes. The 28 page booklet contains starters, man courses, puddings and snacks. It is free to consumers. Distributors Jenks Group, Tel. 0494 33456.



Women have changed their attitude towards cosmetics. Shouldn't you?

Once upon a time, make sup was a little overdone.

False eyelashes. Detachable beauty spots. Even glitter lipsticks

Thankfully, women prefer a more natural look these days.

Which is why Rimmel have introduced Sensiq. A range designed to be gentler on the skin

The philosophy behind Sensiq is simple. No fragrance. No common sensitisers. And



SENSIQ

no testing on animals

But we haven't sacrificed anything in the way of colour

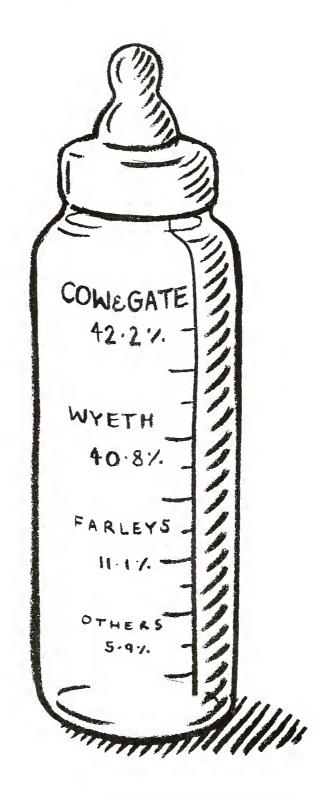
Now we're making Sensiq even more attractive

Our £3 million television and promotional campaign breaks in September.

If you're interested in stocking Sensiq, call our hot line on 071 637 4526.

Judging from our sales so far, this is one change that isn't just cosmetic

We're top of the milks.



Cow & Gate sell more baby milk than anyone else*. So fill your shelves with Cow & Gate and your little customers won't go hungry. Neither will you.



Breastmilk is the best food for babies. The purpose of infant milk formula is to replace or supplement breastmilk when a mother cannot, or chooses not to breastfeed. The c

The Bahyfeeding Specialists

Seven Seas in charity support

Seven Seas Healthcare are promoting their Pure Cod Liver Oil this Winter with a package of activities in support of the arthritis charity, Arthritis Care. Arthritis Care Week (September 16-22) will provide the focus for the main marketing thrust — a sales-driven donation to the charity, says the company.

For every unit of Seven Seas Pure Cod Liver Oil sold during Arthritis Care Week, the company will donate 10p to help the charity continue its work. The promotion will be

The promotion will be publicised widely in the consumer and regional Press to generate widespread participation amongst existing and new users say Seven Seas.

Seven Seas will also be helping to sponsor a new Arthritis Care information booklet, which is being positioned as a "community service" aid for pharmacists. It will include recommendations on diet, natural remedies, exercise, and where to get help.

The booklet will be offered free to readers on selected women's magazines, and will be available at point-of-sale to shoppers. Supplies of the booklet can be obtained from the Seven Seas sales force during August, in preparation for Arthritis Care Week. Seven Seas Healthcare Ltd. Tel: 0482 75234.

Natural Flow Virilactin for healthy men

Virilactin is the latest addition to the Natural Flow range of supplements, created for men.

The ingredients contained in the supplement include B vitamins, vitamin E, zinc, glandular extracts, oyster extract and saffron. The company claims the supplement is designed for men who wish to maintain a healthy active lifestyle. Virilactin is packaged in 30s, retailing at £9.95.

For people who require nutritional advice, Natural Flow have set up a Health Hotline, staffed by nutritionists who can advise if supplementation may be helpful. The hotline number is 0435 882180. Green Farm Nutritional Supplements. Tel: 0435 882482.



Janssen go national with Inoven ibuprofen

Following test marketing in the Central Television area, Janssen are launching their ibuprofen analgesic Inovennationally.

The company will be supporting the launch with a £6 million marketing campaign. Television advertising starts in September on all ITV regions, TV-am, Channel 4, Sky and BSB.

Inoven will also be advertised on platform sites on the London Underground, and on 3,000 Superlite poster sites as near to pharmacies as possible.

The launch heralds a change of direction for Janssen, and sees them making what they maintain will be a determined, long-term attack on the analgesics market. However, the company continues to stress its commitment to pharmacy.

Marketing manager Colin Mackenzie says Janssen chose analgesics for two reasons. The market represents almost 20 per cent of the total £344.6m (trade) UK pharmacy OTC market, much larger than any of the sectors Janssen currently concentrate on. In addition their American parent company, Johnson & Johnson, have significant corporate knowledge of analgesics — their paracetamol brand Tylenol is a US best seller.

Why ibuprofen?

Although paracetamol accounts for the largest share of the UK painkillers market (41.4 per cent), Janssen opted for ibuprofen, which holds only 13.7 per cent, because they believe it has the most significant growth potential.

They feel that continuing support from pharmacists and a consumer trend towards "all-purpose" analgesics have been contributing factors to ibuprofen's success, with 15 per cent year on year growth.

Janssen also identified the "clear gap" for a broad spectrum brand below the best seller, Nurofen, and above the number two and "niche" brands. Mr Mackenzie says: "This presents a major opportunity for a consumer driven brand like Inoven to take a real stake and thereby fuel growth of both the sector and the total analgesics market.

"The Pharmacy status of Inoven ensures pharmacists will reap the rewards of the growth of the ibuprofen sector of market."

During the test market lnoven became the number two ibuprofen brand in the Central area outselling the previous number two by four times, and Nurofen twice. Pharmacists were also impressed by the marketing support given to the brand, the company claims. It offers a profit on return of 33 per cent.

Inoven ibuprofen is available in 200mg sugar-coated caplets. They come in flip-top, tamper-evident, crush-proof packs in three sizes: 12 (£0.89), 24 (£1.70) and 48 (£3.19). People will remember Inoven as "the one in a plaster carton", Mr Mackenzie believes.

The caplets are small and white, because research showed that this form gave assurance of a more effective and trustworthy pain reliever, say Janssen. The "easy-to-swallow" message is communicated on-pack with an illustration of two actual size caplets.

Pharmacists who order Inoven will receive a range of POS material, including a triple tower or single tower dispenser, leaflets, a script signing board and pen, shelfedgers, and posters. Competitions for pharmacists and assistants are planned. Janssen Pharmaceutical Ltd. Tel: 0235 772966.

A handwash joins the Atrixo range

Smith & Nephew have extended their Atrixo handcare range with the introduction of a handwash formula.

The soap free formulation Atrixo handwash (200ml £1.25) has been designed to provide gentle cleansing with skin softening benefits, says the company.

The product is packaged in a pearlised pump-action container. Smith & Nephew Consumer Products Ltd. Tel: 021-327 4750.



Herbal secrets

The London Herb & Spice Company have introduced a Secret Garden variety pack containing four varieties of herbal fruit teas.

Each pack contains five tea bags of each of the four blends: orange dazzler, strawberry fair, cherry pickers punch and apple

The pack sells at £1.19 and is supplied in cases of 12 packs (£10.35 trade) say *The London Herb & Spice Co Ltd. Tel: 081-680*

AAH Pharmaceuticals are offering Fison's Paracodol 100s (cocodamol eff) at £1.96 on orders of three or more packs. The normal trade price is £2.45. The order applies to broadsheet, link or telephone orders, and is open until August 31. AAH Pharmaceuticals Ltd. Tel: 0928 717070.



You'll feel much better after you've taken a few dozen bottles of Asilone.

We're about to spend £1.5 million this autumn making it a household name.

Asilone liquid and tablets is the first ever for serious indigestion remedy.

Extensive consumer P.R. and point-of-sale vi



hand in hand with continuing support of our escription suspension business.

And, as if you didn't have enough reasons to commend it, we've even had new packs designed.

Of course, you'll find Asilone's still as effective as ever.

In fact the only discomfort you may experience is if you haven't ordered enough.

Almay range gets lippy

Nicholas Laboratories have added a colour performance lipstick to their Almay range. The lipstick is said to have been designed to satisfy consumer demands for a lipstick that conditions and protects as well as providing lasting colour.

Colour performance lipstick (£5.95) is available in 10 shades in creme and pearl and also contains

a UVB screen.

The lipstick comes with its own display unit with testers and consumer leaflets and has a rear stock holding facility. It is packaged in a silver container with the Almay A logo on the top. Nicholas Laboratories Ltd. Tel: 0753 23971.

Body defence from Arden

Elizabeth Arden have introduced a new addition to their Immunage UV Defence team — the Immunage UV Defence hand and body lotion.

The lotion is said to be suitable for the hands, neck, and legs — all areas of the body that are likely to be regularly exposed to UV light.

Described as non-acnegenic and PABA-free, the lotion is said to be light and easily absorbed. It has a SPF of 15 and contains vitamins A and E.

The product will be available from the beginning of next month (200ml £16.50). Elizabeth Arden Ltd. Tel: 071-224 1213.

Philishave promotion

Philishave's Autumn promotional campaign offers a high value cashback offer across the entire range, including the four new rechargeable models.

The promotion, which runs from September 10 to October 27, offers customers a £10 refund on the new top-of-the-range HS975 and a £5 refund on other Philishave models retailing at over £30. There is a £3 refund on all models selling for under £30.

The offer will be heavily supported by a national and selected regional press campaign at the end of September which is designed to give 32 million adults the chance to see the advertisement three times each. *Philips DAP Tel: 081-869 2166.*



Macleans gets bold with brand new look

Macleans toothpaste has been given a bold, new look for the 1990s, according to Smithkline Beecham.

The freshmint variant now has a brighter, vibrant blue pack while the mildmint range, which has a new improved flavour, comes in a dark green pack, says the company

In addition, the new packs of Macleans toothpaste will incorporate helpful Health Education Council advice and tips on effective oral hygiene for all age groups say Smithkline Beecham Personal Care UK Ltd. Tel: 081-560 5151.



Elizabeth Arden add to the Red Door range

Red Door, the fragrance from Elizabeth Arden, now features a new bath and bodycare range.

The range comprises: perfumed bath and shower gel (200ml \$14.50); soap (100g \$7.50); perfumed body cream (200ml \$19.50); body lotion (250ml \$16.50); body powder

(150g £19.50) and an antiperspirant deodorant spray (150ml £9.50).

The range comes packaged in gold and red to complement the existing fragrance range, and will be available from September say *Elizabeth Arden Ltd. Tcl: 071-224* 1213

Oral hygiene outlook encouraging

The outlook for the dental hygiene market is encouraging, with growth predicted for mouthwashes and rinses, therapeutic toothpastes, professional toothbrushes, and flosses, according to The Economist Intelligence Unit's latest Retail Business market report.

There is a general move towards therapeutic rather than cosmetic products, says the report. However, consumers are unlikely to buy more than two toothbrushes a year and *per capita* usage of toothpaste is low.

The mouthwash market has shown the highest growth over the last 12 months. In 1989 the market was worth £30 million at rsp, representing a sixfold increase on value since 1984. It is estimated that multiple grocers account for over 55 per cent of sales, with chemists, including Boots, taking around a 30 per cent share.

The toothpaste market, valued at £146m in 1989, showed an increase of 57 per cent on 1984. Consumers are prepared to pay more for a therapeutic product they believe provides a distinct benefit, says the report.

The report also highlights a trend towards more expensive toothbrushes, with professional brushes accounting for more than half the market. In addition, children's and character toothbrushes have become increasingly popular. However, the unit growth in sales has been relatively slow. Boots and other chemists accounted for 40 per cent of sales by volume and 50 per cent by value in 1989 according to the report.

The market for dental floss was worth £5-6m at rsp in 1989, a 9 per cent increase on 1988. Increased awareness and demand for therapeutic products should stimulate future sales, while improvements in quality, such as flosses which do not easily fray, are likely to provide the key towards future market growth, the report concludes.

EIU Retail Business (No 390 August 1990), 40 Duke Street, London W1A 1DW.

Prima Brands of Belfast have been appointed agents to the Mentholatum Company in Northern Ireland. Orders for Mentholatum products should be directed to Prima Brands, Edgar Road, Comber Road, Carryduff, Belfast BT8 8NB Tel: 0232 814700.

AAH home in on two more for range

AAH Pharmaceuticals have added two new products to their Home Health catalogue available from this month.

The walking stick wrist strap features an adjustable Velcro strap which is wrapped around the cane shaft. A leather loop is then placed over the wrist to prevent the elderly or infirm from dropping the sticks.

The second item is specifically designed for people who use a walking frame. It is a knotted bag which is manufactured from plaited nylon cord which then clips to the frame and can be used to carry personal items or shopping. AAH Pharmaceuticals Ltd. Tel:

Lentheric Morny are sponsoring the 1990-91 National Squash Championships with their Adidas fragrance. The competition, which is open to all squash clubs in mainland UK, is expected to attract nearly 1,000 entries involving nearly 10,000 individual players. Lentheric Morny Ltd. Tel: 0276 62181.



International leaflet

"All about head lice" is a leaflet, which has been produced by International Laboratories. They have also launched a video called "Let's lose lice".

The leaflet provides information on how to detect lice and nits, inspect a head properly, and eradicate the problem. It is set out in an easy-to-read format with lots of photographs, says the company.

Copies are available from International at Floats Road, Wythenshawe, Manchester M23 9NF. Pharmacists are requested to state whether they are recommending malathion or carbaryl, in order to receive the relevant version, and to state the number of copies required.

The video explores many myths surrounding lice, and encourages parents to get involved with detection. It is available (£21.50) from Healthcare Productions on 071-383 2222. International Laboratories Ltd. Tel: 0691-945 1161

Polaroid to make a pass with Express

Polaroid plan to target pharmacies with their Studio Express passport photograph system. The company argues that as the general public already associates pharmacies with photography through their traditional D&P services, a passport picture service potentially offers substantial increased business.

The system involves the use of a hand-held camera, and the full kit includes the camera, 20 films, a training video, mirror, back cloth, 160 passport wallets and promotional material worth \$300. The system costs \$695. Polaroid (UK) Ltd. Tel: 0727 59191.

AAH Pharmaceuticals, in conjunction with the Chancellor Group, are running an August promotional offer on Stingose. The special price of £15.48 per dozen offers a reduction on the normal trade price of £18.12 per dozen and will mean a 40 per cent p.o.r. for customers, says the company. AAH Pharmaceuticals Ltd. Tel: 0928 717070.

HEAD LICE TREATMENTS ARE AS VARIED AS HAIRSTYLES...



Farley's offer display deal

Farley's have cooked up a deal for pharmacists: during August, September and October the brand will be giving away 80 *Le Creuset* cookware sets worth £200 each.

Crookes are also offering pharmacists a free wall clock if they display Farley's six new Meal Timers variants in their pharmacy alongside the existing range. A 10 per cent discount on any Meal Timers variety will be given with orders of one case of each of the new variants.



Pharmacists will be provided with a coupon offering them the chance to win a *Le Creuset* cookware set. Farley's are giving away 10 sets every week from August 13 to September 28 and on October 26. Details of the competition will appear on the coupon provided by territory managers. *Crookes Healthcare Ltd. Tel: 0602 507431.*

Aquafresh toothpaste is being promoted in a new \$2 million advertising campaign. Developing the "Three in one protection for the family" theme, the advertisement will be screened until mid-September on national television, Sky and BSB. It forms part of the brand's relaunch which includes competitions, on-pack offers on the pumps and added value activities. Smithkline Beecham Personal Care UK. Tel: 081-560 5151.

The Profile metal razor launched by Wilkinson Sword in June, is being supported by a £1 million national advertising campaign. Advertisements will appear in selected national daily and Sunday newspapers, and in the Belfast Telegraph. Some of the press advertisements will carry a coupon, allowing 20p off the purchase price of the new razor. There will be a total of 18 million coupons in circulation say Wilkinson Sword Shaving Division. Tel: 0670 713421.



Gillette have come up with a new combination gift pack for Christmas. The pack contains the Sensor system razor, three cartridges and a 75ml can of shaving gel. The pack will retail at £2.29, the same price as the Sensor system alone, say Gillette UK Ltd. Tel: 081-560 1234

Varta to pack batteries in recycled plastic

Environment-conscious battery company Varta are packing their batteries in recycled plastic, reflecting a corporate policy of using recycled materials for packaging where ever possible.

The company is recovering offcuts from a packing company which would normally have been discarded and is recycling them through a plastics manufacturer.

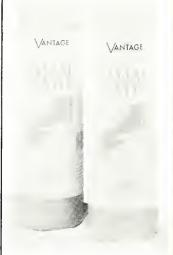
In the company's Silver range, the company is offering HP7s packed in eights and HP2s and HP11s packed in fours, all at a recommended price of £2.29, offering a "considerable saving" to consumers over their blister packed equivalents.

Continuing their support for the Rainforest Foundation, the company is offering "Save the Rainforest" T-shirts, with £2 of the £6 purchase price going direct to the charity. Application details are carried on the backs of all packs. Varta Batteries Ltd. Tel: 0784 464341.

Vantage get fresh with foam bath

AAH have added a "Seafresh" fragrance to their Vantage moisturising creme foam bath selection.

The new variety comes in a one litre PVC bottle retailing at £1.08 (£4.14 per trade outer of six). AAH Pharmaceuticals Ltd. Tel: 0928 717070.



lordan are offering a free colour print film with purchases of their toothbrushes.

Customers who send tearstrips from the back of any two Jordan brushes will receive a 12 exposure Scotch film. *Alberto Culver Co. Tel: 0256 57222*.

Light up with Unichem

Unichem have announced new promotion for pharmacists on the Ever Ready torch range which represents a 32 per cent por.

represents a 32 per cent por.
Ever Ready's floor display stand, which carries 77 torches across the range including ten packs of the R110 torch and V140 and seven packs of L130 and V130, is available to retailers at £217.44 (total rsp £367.73).

The hand and pocket torch stand contains 16 torches with packs of R250, L240/B and L135 among others. The cost to Unichem customers is \$48.76 (rsp \$82.45).

The promotion also includes an offer on Ever Ready's cycle light gift pack with an rsp of £14.49, available at £8.47. *Unichem. Tel: 081-391 2323.*

ON TV NEXT WEEK

GTV Grampian B Border C Central CTV Channel Islands LWT London Weekend C4 Channel 4

U Uister
G Granada
A Angla
TSW South West
TTV Thames Television
TV-am Breakfast
Television

SK Sky STV Scotland (central) Y Yorkshire HTV Wales & West TVS South TT Tyne Tees

Aquafresh toothpaste	: All areas
Complan:	All areas
Dettol Liquid:	All areas except HTV,CTV,TVS,LWT,TTV & C4
Gillette Sensor:	All areas
Lanacane creme:	Y,C,TT & C4
Libra Bodyform:	All areas except CTV,LWT & TTV,TV-am
Listerine:	All areas
Loving Care:	Y,C,A,HTV,TSW,TVS & TTV
Macleans toothpaste:	All areas
Mum deodorant:	All areas
Plax:	All areas except LWT & TV-am
Silvikrin:	All areas
Sure:	All areas
Tums:	All areas

Innovace for new hypertensives too

The Committee on Safety of Medicines has extended the product licence for Innovace, MSD's once daily ACE inhibitor enalapril, to include new hypertensive patients.

It was previously indicated for all grades of essential and renovascular hypertension where standard therapy was ineffective or inappropriate. This was upgraded after examination of data, including post marketing surveillance and prescription event monitoring data from the last five years, say MSD.

More than 1,000 trials have been published on Innovace, and patient experience with the product exceeds 200,000 patients in the UK and more than six million worldwide, the company says. This showed Innovace to be a well-tolerated and effective antihypertensive.

Increasing awareness of the problems caused by other types of antihypertensive therapy are continuing to focus attention on the use of ACE inhibitors in hypertension. MSD say that Innovace is at least as effective at controlling blood pressure and

appears to avoid many of the unwanted effects associated with other hypertensives.

Unlike thiazide diuretics and most beta-blockers, Innovace has not been associated with adverse effects on patient's lipid profile, An added advantage are its positive effects on renal function, say MSD, who believe that Innovace has a valuable role in the management of hypertension.

Merck Sharp & Dohme Ltd. Tet: 0992 452134.

A double-wrapped form of the long-acting local anaesthetic bupivacaine hydrochloride injection is now available. Each unit consists of an ampoule sealed within two separate envelopes. The product comes in cartons of ten by 10ml ampoules in two strengths — 0.25 per cent and 0.5 per cent. Antigen Europe. Tel: 0293 614616.

Degussa will be distributing their oncology products Mitoxana, Uromitexan, and Endoxana on hospital contract only through AAH Pharmaceuticals only from September 1. Degussa Pharmaceuticals Ltd. Tel: 0223 423434.

Glauline 0.6pc drops withdrawn

Smith & Nephew are withdrawing Glauline 0.6 per cent eyedrops, following reports of cases of anterior uveitis associated with its

The 0.1 per cent and 0.3 per cent strengths remain available. Pharmacists presented with a script for the 0.6 per cent strength are asked to contact the prescriber to confirm that it should be dispensed.

The company is advising opthamologists and general practitioners that all patients managed with Glauline 0.6 per cent should have their medication reviewed as soon as possible.

They should be switched to the 0.3 per cent strength, or an alternative ocular hypotensive say Smith & Nephew.

Glauline 0.6 per cent will continue to be available until October 1, to facilitate the change and ensure prescriptions can be met in the interim. Unused stock will be recalled at a later date. Smith & Nepheve Pharmaceuticals Ltd. Tel: 04023 49333.

ACBS approval

Scientific Hospital Supplies have had three products approved by the Advisory Committee on Borderline Substances. They are Lorenzo's Oil, Generaid, and Maxamaid XP bar.

Lorenzo's oil (710ml \$53.25) contains four parts of glycerol trioleate oil and one part glycerol trierucate oil. It is prescribable for biochemically proven and/or clinically manifest adrenoleukodystrophy.

Generaid (200g £14.69) is a protein-based feed supplemented with amino acids, which can be prescribed for patients with chronic liver disease and/or portohepatic encephalopathy, and Maxamaid XP bar (25g £0.76, all prices trade) for phenylketonuria. Scientific Hospital Supplies Ltd. Tel: 051-228 1992.

The formulations of Pholcomed D and diabetic forte linctuses are changing. The new formulations will contain pholcodine, as the only active ingredient. Product to the new formula can be distinguished by its new label, and the new formula is sugar free. *Medo Pharmaceuticals Ltd. Tel: 0494 772071.*

BUT DERBAC-M IS THE ONLY MALATHION LIQUID THAT IS EFFECTIVE AND GENTLE

There are many shampoos and alcohol-based treatments but Derbac-M is the only aqueous malathion liquid.

This not only makes Derbac-M lethal to lice but also very gentle on the skin. Good news for those with eczema, dermatitis or asthma. Derbac-M's efficacy has been proven in the

community over many years and its pleasant fragrance assures ready acceptance.

Derbac-M gets right to the root of human lice problems. For further information please write to: International Laboratories Limited, Floats Road, Wythenshawe, Manchester M23 9NF.



NUR FEN ANN UNCES



Now Nurofen comes in a soluble form, the only headache your customers will have is which kind of Nurofen to choose.

And with £2 million being spent on the television

N THER BREAKTHR UGH

launch of Nurofen Soluble alone, we've even taken the pain out of selling them.

It's been said that Nurofen is the best all round way to dissolve pain. Now it's proven.



A new source of advice

C&D reports from Liverpool on how drug information pharmacists at the Medicines Resource Centre are advising GPs on the use of medicines

The formation of the Medicines Resource Centre (MeReC), announced officially at the pharmaceutical industry's annual dinner in April by Health Secretary Kenneth Clarke, was greeted with suspicion in some quarters. "A step on the road to a national formulary," said one observer.

But concern may have been premature, if the aims of MeReC, as spelt out by its director Nick Hough, are achieved. "The official remit is to provide professional advice and information to GPs in England on medical products and matters relating to prescribing," he says. "The emphasis will be on safe, rational and cost-effective prescribing — a similar job description to that of many drug information and clinical pharmacy posts."

The link between MeReC and the drug information service is not a coincidence. The choice of Liverpool as home for the Centre owes much to the reputation of the Mersey Regional Drug Information Service, producers for over ten years of the Mersey Drug Letter, one of the first and most respected drug information bulletins in the UK. And feedback on the work of MeReC, from doctors and pharmacists, is being directed through the national drug information network.

The closeness of the ties with drug information is reflected in regular meetings to discuss subject matter with sections of the Mersey drug information subcommittee and in the qualifications of the three pharmacists that staff MeReC.

Director Nick Hough has worked as a hospital pharmacist, has an MSc in clinical pharmacology, spent time as teacher practitioner at Portsmouth Polytechnic, and, most recently, was a clinical research scientist, covering adverse drug reactions at Glaxo Group Research International Drug Surveillance.

Findlay Hickey obtained an MSc in hospital pharmacy while working in Edinburgh and before joining MeReC spent two and a half years in the West Midlands Adverse Drug Reaction Reporting Centre in Birmingham.

Damian Cooper has retail experience in Manchester and clinical pharmacy experience in Bradford and Liverpool. He spent six months in Mersey's regional DI centre before joining MeReC.

It was last Summer that the Department first approached the Mersey Regional Health Authority about a department to provide information about prescribing for GPs. Following submission of a formal protocol by the Region, MeReC was established for four years up to March 31, 1993 with a budget of \$250,000 a year, and the staff were recruited.

The first year was taken up with setting up the centre — the three pharmacists and a secretary occupy a fairly small, relatively spartan room on the third floor of Mersey RHA headquarters in the middle of Liverpool. A training centre for medical advisors appointed by the new family health services authorities is being set up in the same building.

MeReC produce two publications — they first appeared in June — one aimed at GPs and the other for the medical advisors. Information

comes from literature searches and from experts in the particular field. The team has already built up a good relationship with the Department of Clinical Pharmacology at Liverpool University, who are represented on MeReC's steering group, along with the DoH and general practice.

"The MeReC Bulletin for all GPs in England is meant to be short and snappy, quick to digest. Each month, we will have two or three topics varying in length depending on their importance and how we lay it out," says Nick Hough. The intention is to produce 12

four-page A4 issues a year.

Topics to be covered include new product summaries — new single agents which warrant a mention in their own right or two or three products in the same class — and therapeutic topics where space allows. "We don't have a blanket statement on generic prescribing," says Nick Hough. "We will look at it topic by topic, and may comment on the place of generics in a particular area. You could say that there are few problems in using generic antibiotics, but in the respiratory field, say branded versus generic anninophylline, there may be a reason to stick to one make."

Adverse drug reactions may be an obvious subject area for the *Bulletin*, particularly following the demise of Government funding for GPs' copies of the *Adverse Drug Reaction Bulletin*. Being pharmacists, the team is also particularly interested in formulation. ''There are lots of gadgets about and we will try and evaluate them,'' says Nick Hough.

Much of the *Bulletin*'s content may appear

Much of the *Bulletin's* content may appear to be similar in outlook to that offered by the Consumers' Association's *Drug & Therapeutics Bulletin.* "There are going to be areas of similar interest — new products, therapeutic reviews, and so on. But we are not going to avoid doing clinical subjects just because the *D&TB* does them. However, we are pharmacists and so have a different interest."

Mr Hough says the article on "co-names" was done because pharmacists, used to being on the receiving end, pick up on things prescribers need. A suggestion that the Centre could pick up on PACT and cost statistics is being investigated in talks with Conrad Harris, professor of general practice at Leeds, who was involved in the writing of the Department's PACT analysis booklet for GPs.

Community pharmacists have not been forgotten by their fellow professionals as potential recipients of the *MeReC Bulletin*. "We are not funded to send it to pharmacists but it seemed sensible as community pharmacists might be asked by GPs to help them in prescribing matters," says Nick Hough. From the first issue, over 12,000 copies of the *MeReC Bulletin* have been sent out free via *PSNC News*, with the bonus that pharmacists in Wales get it too.

The Centre's other publication, the *MeReC Bricfing*, aimed at FPC medical advisors, is a slightly larger publication, at eight A4 pages, with a slightly more formal style, although with a similar logo in "pharmacy" green, like the *Bulletin*. If offers a more in depth review of one particular subject area — the first was NSAIDs. Again monthly publication is envisaged, with a possible linking of the content with that of the *Bulletin*.

When news of the launch of MeReC was first announced, concern too came from pharmacy groups that here was a unit advising GPs in areas that might properly be tackled by local community pharmacists. Nick Hough's own view is that the involvement of pharmacists over the various "medical" groups who might have been chosen to advise on prescribing, is a "shot in the arm" for the profession, and recognition for the excellence of the national drug information service, and of Mersey in particular.



The MeReC men (left to right) Damian Cooper, Nick Hough (director) and Findlay Hickey

Milupa delivers



more sales



at all times.



Milupa outsells every other babyfood company in chemists.⁽¹⁾

That's because brand leader Milupa offers exactly what you and your customers want.

A wide variety of delicious, wholesome meals made entirely from top quality ingredients with no artificial colourings, flavourings or preservatives.

Milupa Infant Foods are clearly divided into Breakfasts, Dinners, Desserts

and Tea-time savouries to make merchandising easy and to ensure baby's mealtime routine fits in with the rest of the family's.

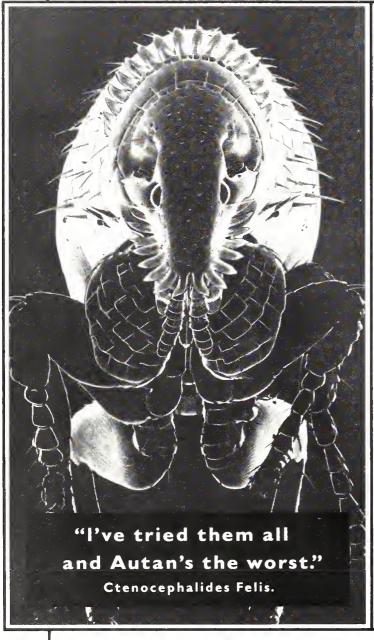
So it's no wonder Milupa delivers more sales. Time and time again.

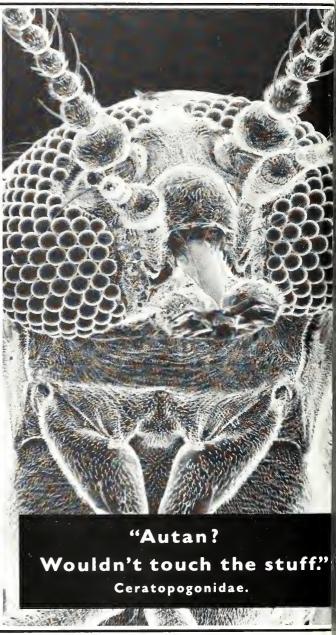


Milupa babyfoods. The one taste little experts agree on.

"PSource: A.C. Nielsen, total babyloods £ market shares March 'April 1990, total pharmacies [exi-

Insect repellents.7





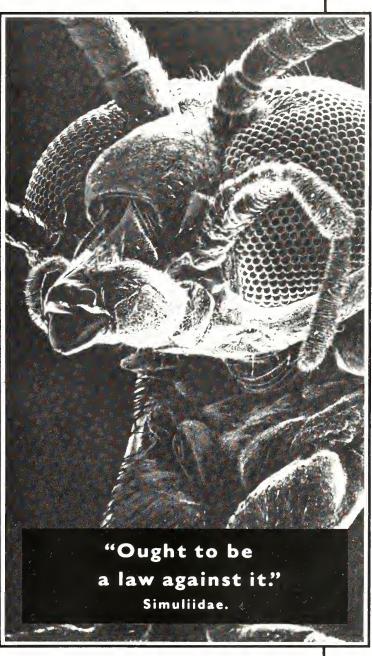
There's nothing biting insects like less than Autan. Which proably explains why it's the best selling repellent both in Europe and the U But what makes it work so well?

The secret's an enhancing agent called PEG 400. It's a substance no other insect repellent contains.

PEG 400 increases the efficiency of DEET, the ingredient recognize as the most effective at driving insects away. So a lower level of DEE provides total protection for up to eight hours.

e consumer speaks.





But try telling any biting insect that Autan's not as strong as other ands. Tell your customers, however, and you'll get a much better reaction.

pecially as you can safely recommend Autan as total otection for even the youngest skin.

Autan comes as a stick, gel, sachet, or ozoneendly spray. So there's enough choice to keep everyone ppy. Everyone except the consumers.



Nothing's more repellent to biting insects.



As quality controllers for Mates, being satisfied with a condom is all part of the job.

Doreen, on the far left, is a tensile tester. This involves stretching condoms on a rack-like machine. In order to find out how strong they are, she goes to great lengths. Five feet or more, usually.

Ann, to Doreen's right, fills condoms up with water, before rolling them on absorbent paper to check for holes.

We're proud to say she's never yet blotted her copy book.

Other quality controllers complete all the standard tests required by the British Standards Institute. Judy and Jane however, perform tests above and beyond our call of duty to the BSI.

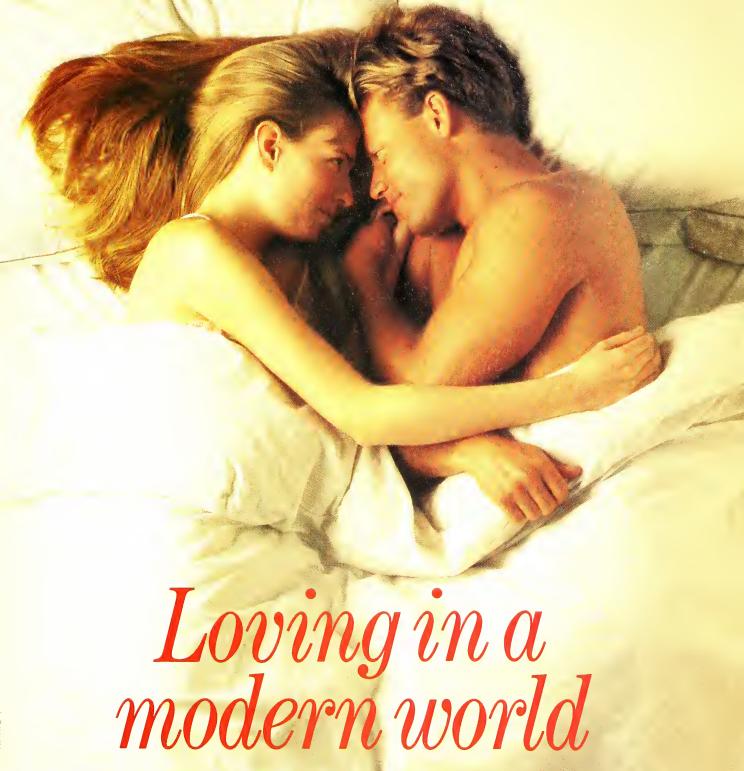
To check for signs of stress Jane, on Ann's right, oir inflates Mates until they burst. Don't be concerned, the inevitable only happens after they expand to

around 4 ft. Next to her stonds the electrifying Judy, who passes a current through every condom. If they are able to withstand 1000 volts, they are acceptable.

Finally, they're reody for a coat of lubricant containing the spermicide Nonoxynol 9.

If Motes condoms survive all this, Doreen, Ann, Jane and Judy will at last be satisfied. And so should your customers.

MATES MAKE SENSE.



It is news to no one that AIDS has increased public awareness about the dangers of casual sex and promoted the use of effective barrier methods, namely condoms. It is also known that concerns about the Pill's sideeffects have pushed its users towards less "risky" contraceptives. Now a report published in May claims that for the first time since the mid 70s, the condom is more popular than the combined Pill as the main

method of contraception.

The Durex report, "The facts of life in the 90s", compiled by LRC Products with Measures of Health and Nielsen Marketing Research, summarises research into the use of and attitudes towards condoms. It found that among adults aged 16 to 44, 20 per cent use condoms, whereas 19 per cent use the combined Pill. However, when the figure for the mini Pill is added to this, the total for 'the Pill' is 22 per cent.

LRC also found significant differences in

the method selected by the various age

groups. The condom is especially popular among the under 20s, where for a third of users it is their main method of contraception. The Pill continues to be most popular in the 21 to 25 age group, and declines rapidly in use after 35.

Distribution of condoms has spread outside the traditional outlets pharmacies, family planning clinics and toilet vending machines — into supermarkets and garages. The chemist sector has lost some of its pre-AIDS share. It has dropped from 56 per cent to 48 per cent, but still remains the biggest source of supply.

The greatest change has been in the vending sector, where the vast increase in the number of outlets has almost doubled its market share from 8 per cent to 14 per cent, say LRC. They also believe that sales through supermarkets are set to increase Tesco, in particular, are raising their stock

Added to this is the fact that many

people, especially women, say they feel most comfortable about buying condoms in supermarkets. Women have become an important purchasing group, with the number prepared to buy them having doubled from 23 per cent in 1985 to 48 per

cent in 1989, say LRC.
The market for condoms grew by 25 per cent in real terms between 1986 and 1989, but has since slowed down, say market researchers Mintel. It puts the sterling value at £33m for 1990, and forecasts a 10

per cent growth by 1994 to £36.3m.

Mintel put the 1989 estimated value of the market of the Pill at £35m, compared to £31m (1989) for the condom. But they say the market is not helped by the fact that after every Pill scare, there is a significant drop in the numbers of women using it. Its "distribution" has changed following cuts in Government funding for Family Planning

Continued on p232

Contraception	methods use	d by FP clinic	patients in En	gland, 1983-8	37
	1983 %	1984 %	1985 %	1986 %	1987 %
Oral contraception	58	55	53	53	50
ICD .	16	15	15	1.4	13
Cap/diaphragm	8	9	9	9	9
Condom	10	12	13	13	16
Chemicals	1	1	1	1	1
Sterilisation	1	1	1	1	1
Other	1	1	1	1	$\bar{2}$
None .	6	7	8	8	9

Continued from p231

(FP) clinics, and more women are seeing their GPs for prescriptions than before.

The market for diaphragms and spermicides was worth about £2.6m at manufacturers selling price in 1989 (spermicides £1.5m, diaphragms £1.1m). The appeal of IUDs has been on the wane for many years, whereas sterilisation is gaining popularity with men and women aged 35-44. Other methods are still in development, many of which should come onto the market within the next ten years.

* All Mintel figures from the July 1990 Market Intelligence Report on contraceptives (price £160, Tel: 071-606 6000)

Condom mania

Operation Condom offered free condoms to holiday-makers travelling from Manchester Airport during one week last month; debate continues about whether condoms should be prescribed; and even MPs have been armed with them!

C&D takes a look at some of the brands in pharmacies*

Durex

Source, Mintel analysis

Three words — durability, reliability, and excellence — were put together to form Durex, so the story goes.

True or not, its reputation is such that "Durex" and "condom" are often used synonymously. With their brand leader, LRC might have sat back and rested on their laurels. Not so; the company is actively involved in promotion, education, product improvements, and innovations

AIDS has been good for LRC. So have the changes in attitude it has precipitated. Ten years ago when they sponsored a formula one racing car in a rally televised on the BBC, the word Durex had to be covered up. Now the product is advertised, and the word condom used openly on television.

It was about four years ago that things changed, brought about by the AIDS scare and resultant moves towards "safer sex". This caused a 20 per cent volume increase in the condoms market. Good news for LRC.

But this boost brought forth a rush of new brands, most noticeably Richard Branson's Mates in 1987 (now owned by Ansell subsidiary Mates Healthcare). Competition for the brand leader? LRC claim never to have been bothered. Their parent company's results this year show a 25.6 per cent increase in operating profits from its health and personal products division (which includes Durex). They also report a 5 per cent growth rate in worldwide consumer purchases of condoms, with additional market share won in Italy, France, Spain, and the UK.

Indeed, LRC say they welcome the advent of manufacturers who, like them, will spread the safer sex message. It's become something of a crusade for the two Durex marketing managers David White (OTC products) and Ian Smith (prescription products), who talk enthusiastically about

their "commitment to sex education".

The Durex Information Service sends out 1.5 million free leaflets each year to people of all ages. The have put together a presentation case for health educators, and a "No worries" pack for schools. Feedback from this has prompted LRC to produce a condom demonstrator which they will soon be launching.

David White says: "With increased awareness of AIDS and condoms, safer sex is of paramount importance, but it should also be fun." Because of this, the company has become involved in some "very visual focuses" which they say have been "hugely successful". They have sponsored the Suzuki motorcycle racing team for the 1990 season, and produced a Durex hot air balloon, which they take around the country to various promotional events.



They also produced a booklet on sex for Ms magazine called "Body talk" aimed at the 15-20 year old readers. Victoria Gillick objected and took LRC to the Press Council (she lost), but the readers and health educators "loved it". "It was frank, but we were after normalisation and equipping teenagers with the facts," says David White.

A similar project last month with Company was aimed at 18-30 year olds, some of whom need reassurance, says Mr White. "We had a super response to it. It was very responsible and very explicit. For example it included facts on oral sex, but we couldn't leave it out because people do it."

The company is looking to do similar promotions in the future, and is always on

the lookout for new promotional ideas. Key rings with comical condom cartoon illustrations, which also house a condom, are soon to be available. "We have got to be involved in a plethora of activities, which we must tailor to the needs of each sector," says David White.

LRC stress the importance of the pharmacy sector to them. They claim to have a 95 per cent (value) share of that sector, and have recently sited new merchandisers in some 2,000 independent pharmacies. ''It is a bigger, quality unit, designed with longevity in mind because the lion's share of condom sales is still with pharmacy,'' says Mr White.

The company is encouraged by the fact that the condom is the most popular method of contraception among 16-20 year olds. With positive attitudinal changes and embarrassment barriers being broken down, they feel the condom is very much seen as the natural choice for the future.

However Mr White is worried that complacency may be setting in, which he feels might affect the younger people who have not been "scared" into taking the safer sex message on board in the same way as people who saw the Government AIDS warning campaign and early condom advertisements on television. "We will continue trying to ensure that the public is aware of the dangers, through education," says Mr White.



Mates

Launched in 1987, Mates are now Durex's biggest rival in the market. In the early days, they had a 'cheap and cheerful' image to encourage young people to practice safer sex. It has not all been plain sailing. But Mates have grown up and, with maturity, have acquired a new image...

Having been troubled by reports last year that their condoms were poor quality, and with many outlets deciding to stop stocking them, Mates Healthcare relaunched Mates early this year (Counterpoints, January 12).

They were upgraded to the 1989 British Standard for condoms, and the prices increased because the lower price was equated with lower quality, say Mates. They aimed to increase their appeal and widen their distribution, especially in pharmacy and in family planning clinics, using Countercall as their distributors. Following the demise of that company in June, Mates have been handling the chemist sector direct, using their own sales team.

As part of a £2m promotional spend, the company launched a £75,000 educational campaign, comprising leaflets, posters and sampling, as well as a report on the history, manufacture and use of condoms. All are available from their Information Service.

A £150,000 advertising campaign in the women's Press and on television was also executed. Advertisements appeared over five months in six monthlies, and a new commercial started on April 30 in Central and Yorkshire regions. It was shown before 9pm, and Mates claim to be the first

Market sectors by outlet	
Boots	25%
Chemist (other than Boots)	23%
Drugstore	7%
Family Planning Clinic	10%
Supermarket	7%
Mail Order	3%
Vending	14%
Other	7%
Convenience Store	2%
Garage	2%
Source: LRC Products	

company to make use of the relaxed television advertising ruling on condoms.

The company also claims to have a 22 per cent (volume) share of all condom sales, and is looking to increase this to 40 per cent by 1993. Mates also claim a 7 per cent share of the pharmacy market (excluding Boots), 17 per cent in grocery, and some 20,000 vending machines nationwide.



Mates launched their mint fragranced variant in January, which they say was the first fragranced condom on the market. It is also the only non-lubricated condom in the range, and so is suitable for those who suffer allergic reactions, say Mates. "Research has shown that a small percentage of people are allergic to the spermicides used on the majority of today's condoms, or simply do not like the smell," says the company

Other brands

Although not common in pharmacies, there are several brands which have small shares of the market, accounting for a total of around 1.5 per cent

Yago Holdings say they specialise in the niche market, supplying various brands to the trade and direct to health authorities.

They distribute HT Special condoms, which in a Which? magazine test (April 1989) were found to be the strongest and safest condom against HIV infection. Yago also supply the ''fun'' end of the market with brands such as Billy Boy and Aegis coloured, ribbed and flavoured condoms.

The "economy" market is also served with brands such as standard Aegis and Maximum. Yago distribute other brands, all of which, they say comply with the ISO 4074 standard.

Lifestyles, launched in June 1984 by Warner-Lambert, were discontinued over a year ago. They were made by Ansell, who also make Mates.

Condom brand share by volume, 1985-89 1985 1987 1989 \$\frac{\pi_0}{\pi_0}\$ \$\frac{\pi_0}{\pi_0}\$ \$\frac{\pi_0}{\pi_0}\$ Durex 95.5 96.4 80 Mates * 18.5 Others (Lifestyles, Jiff, Duet, RFSU, Red Stripe) 4.5 3.6 1.5 * Mates brand share for 1987 is included in Others \$\frac{\pi_0}{\pi_0}\$ 4.5 3.6 1.5

Update on...

... diaphragms

LRC marketing manager Ian Smith believes that pharmacists are more likely to get involved in the supply of diaphragms because of the shift of patients from family planning clinics to their GPs. 'Within the next four to five years, there will be a 20 per cent increase in the number of diaphragms supplied through pharmacies due to this greater GP involvement,' he predicts.

With this in mind, the company and the Royal College of Nurses have produced a video to train practice nurses, called "Overcoming the barriers to barrier

contraceptives'

LRC also worked with a group of FP nurses when they relaunched their range of diaphragms last year. Their research had shown that many women were put off by the appearance of the product, says Mr White. Once they had improved it, they consulted the nurses who coined the name Satin Finish for the flat spring cap.

The company feels that the product has overcome major objections to its use, and has been "very well received". New consumer friendly packaging — a compact case, an FPA set of instructions, and a carton targeted at users rather than GPs—ties in with the repackaged spermicide

range

Feedback is positive, says Mr White: "Nurses are commenting on the increased usage of diaphragms. Anecdotely, there has been a move towards them. On the health side, it is a female barrier method that involves no chemicals and no hormones. We hope to profit from this, and expect that over time, pharmacy will too."

...C-Film

An alternative to spermicidal creams and jellies is the nonoxynol-9 containing C-Film. In fact, its distributors FP Sales say that a six month pilot study in Edinburgh in 1985 found that 17 out of 20 women prefered C-Film, and said they would not return to using their previous spermicide.

In a recently completed trial involving around 300 women, preliminary results show that C-Film is more acceptable than "sometimes messy" creams or jellies, say FP Sales. Once the results are published, the company plans to mount a publicity campaign in medical and trade Press, and women's magazines.

...interuterine devices

Modern copper IUDs are clinically effective and safe for at least five years. This is the consensus view of the medical advisory committee of the FPA and the National Association of Family Planning Doctors, issued in a statement in *The Lancet* (June 2).

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CONTRACEPTIVES

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"Less frequent replacement would reduce the risk of pelvic inflammatory disease, uterine perforation, expulsion, and other complications that mainly occur soon after insertion," the statement reads. This would also reduce cost, inconvenience, pain and upset: "It may result in a greater acceptability of IUDs - particularly in older women whose families are complete and who want a method that will take them up to the menopause.

Clinical efficacy data, both published and theoretical, support the use of copper IUDs for at least five years, said the statement. One, the copper T 380 slimline, was said to have a theoretical lifespan of up to ten

Pregnancy rates from secondgeneration copper were said to be low after six years use. They ranged from one to three in 100 women each year for modern IUDs such as the nova-T and multiload Cu 250. Rates for third generation devices (multiload Cu 375 and copper T 380S and 380A) were said to be about one in 100 women per year or less.

...lubricating

Consumers often use oil-based preparations, such as petroleum jelly or baby oil, as lubricating agents when using condoms rather than the specific water based brands available. Oil has been shown to break down rubber and reduce its strength by as much as 90 per cent.

Indeed, one study found that the damage caused to latex condoms by oil- and petroleum-based lubricants amounted to a 93 per cent reduction in tensile strength after 15 minutes at 37°C. Three waterbased lubricants were found not to adversely affect the physical properties of

Johnson & Johnson carried out tests on their luhricant, K-Y Jelly. It was found to have no detrimental effects on rubbercondoms when in contact for 15 minutes at 40°C. Using an oil-based product as a control, the company found that it reduced the load at break of condoms between 87-90 per cent, and the elongation at break by 60-89 per cent under similar conditions.

■ Johnson & Johnson's K-Y Information Service released a new information booklet last month. "A woman's guide to feeling



good" is aimed at encouraging women in their personal healthcare, say J&J.

The hooklet, in a question and answer format, covers a variety of problems including how to cope with embarrasing itches, the causes and cure for painful sex and the monthly "moody blues

Copies are available, with a stampedaddressed envelope, from: A woman's guide to feeling good leaflet offer, Dumbarton House, 68 Oxford Street, London W1N 9LA.

...progestogen-

The progestogen-only Pill (POP), also known as the mini-Pill, is under-prescribed because its age-related effectiveness is not widely known, according to a report in GP

The POP is as effective in the over-40s as the combined Pill is in women of 20, and is also ideal for many women, such as diabetics and migraine sufferers, who cannot tolerate the combined Pill, the report said.

...Today sponge

Today is as effective as other barrier or spermicidal methods of contraception. including the sheath and diaphragm, say Wyeth. They claim that studies have shown that the sponge and the diaphragm provide a greater degree of protection against trichomonas, chlamydia and gonnorrhoea than the condom.



Sixty years of the **Family Planning Association**

Last month, the Family Planning Association celebrated its 60th anniversary. It was born as the National Birth Control Council from the amalgamation of five birth control societies and changed its title in 1939

Initially the Association operated principally through clinics. Then in April 1974, it handed over its 1,000 clinics and domicilliary services to the National Health Service, and by Autumn 1976 had started to develop new work centred on information and education services.

January 1977 saw the start of the Family Planning Information Service set up by the FPA and the Health Education Council (now the HEA). Its aim was to provide

information on all aspects of family planning, sexuality and related issues, to the public and healthcare professionals.

In collaboration with the PSGB, the FPA launched "Health Care in the High Street in February 1986. Some 12,000 community pharmacists were sent free stands with leaflets for distribution of information on family planning and other issues.

Today the FPA is active in the AIDS campaign, abortion bills, sex education, embryo research and choices of family planning methods in the light of continuing Pill scares. It is also campaigning against the cuts in FP clinic services by district health authorities, who feel that GPs can fill any gaps caused by the reductions.

The Pill: 1960-1990

1960	The first large-scale British clinical trials of oral contraceptives are held
	at Birmingham FPA clinic.
1961	Conovid, Conovid E, and Anovlar are approved for use by the FPA.
mid 1960s	The progestogen-only Pill is developed and undergoes trials
1968	The first POP is introduced in France.
	Three studies in the UK and US reported an increased risk of
	thrombosis with high doses of oestrogen.
1969	The CMS recommends a top level of 50mcg oestrogen.
1973	The first low dose Pill is introduced with an oestrogen content of 30mcg
1977	Studies suggest that long-term Pill use is associated with an increased
	risk of circulatory diseases.
early 1980s	The bi- and triphasic Pills are launched.
1983	The Lancet reports an increased risk of breast cancer for women on the

1987 A new progestogen, gestodene, is developed. 1990 The Pill is 30 years old, and despite the scares is still the most popular

contraceptive method.

Three decades of the Pill

Only 30 years old, yet in its short lifetime, the Pill has been dogged by controversy. But it has come a long way since it was first launched and despite its declining popularity, it looks like being around for a while yet...

The pros and cons of oral contraceptives have been argued over since they were launched. The initial euphoria felt by some was soon marred by reports that the Pill was causing thrombotic diseases in users. And today, the question of long-term sideeffects — in particular cervical and breast cancer — is still unresolved.

"Drink and Pill link to cancer" screamed front-page headlines in Today on June 22 this year. The story appeared as a result of "inconsistent" results from the Institute of Cancer Research, which showed that Pill takers who were "even occasional drinkers" increased their risk of

breast cancer

But the Pill has survived scare after scare, as its benefits have always managed to outweigh its risks in most peoples minds. In the last four years, it has been falling from favour because of a scare not directly related to its effects, but to the fact that it offers no protection against AIDS and other sexually transmitted diseases (STDs). Yet it is still the most commonly used form of contraception in the UK.

The bad Press that the Pill gets has served to ensure that manufacturers continue to research into safer formulations, with lower levels of oestrogen and progestrogen. As recently as 1987, a new progestogen — gestodene — was developed. It is present at a level of 75mcg with 30mcg ethinyloestradiol in Wyeth's Minulet, and also in Femodene.

Gestodene is more potent than levonorgestrel and modifications of it. This has allowed the progestogen content to be half that in other low dose Pills, say Wyeth.

When the Pill was first launched, it contained very high amounts of progestogen which were then cut down drastically due to side-effects. Even smaller amounts were used when levonorgestrel was developed.

Then 1980 saw the launch of biphasic and triphasic formulations, which allowed a very low dose of levonorgestrel to be used in the first half of the menstrual cycle and slightly higher dose in the second.

The amounts of oestrogen, too, have been greatly reduced since 1960. The first Pill in the UK, Conovid, contained 75mcg. Then in 1969, the Committee on Safety of Medicine recommended a limit of 50mcg, in an attempt to prevent thrombotic disease in users. The level of ethinyloestradiol was then cut to 30mcg in 1973, when the low dose Pill was introduced. This is the level found in most combined Pills today.

Although the Family Planning Association last year said that the Pill is not a risk for healthy, non-smoking women, the fact still remains that it is a health risk for some women. And as the public becomes more aware of health issues and opts for a more natural lifestyle, the use of the Pill seems likely to decline.

Single women worried about STDs are choosing barrier methods; married women



Wyeth's Minulet contains new progestogen gestodene 75mg

or those in a stable relationship will probably continue to use the Pill since, at the moment, their choice is rather limited — IUDs, too, have had a bad Press, and sterilisation is an option only for those who have completed their families. Research into improved formulations, such as a Pill tailored to an individual woman's hormonal requirements, continues.

1. The male Pill. Primoteston (testosterone enanthate) is undergoing trials in the UK. It is, at present, given by weekly injections. Because of first-pass metabolism in the liver, only 10 per cent of an oral dose is effective. Researchers have shown that sperm production is suppressed in 70 per cent of men, rendering them temporarily infertile, with few reports of side-effects. Once it is known that primoteston is effective in all men, work will commence on improving its mode of delivery. A marketable product may become available towards the end of the

The abortion pill. Roussel's RU486 is only a contraceptive in the way that abortion is, although there is speculation that it could be formulated as a once-amonth Pill. It has been the subject of much ethical and moral debate, but with Roussel having applied for a UK product licence it may be in use inside a year. RU486 (mifepristone) is a non-surgical abortifacient which works by depriving the womb of

progestogen, thereby terminating a pregnancy. It is in use in French hospitals, and has been found to be effective in 95 per cent of women when used with a prostaglandin analogue.

3. The female condom. Femidon is expected to be on the market in the UK next year. It comprises two rubber rings, one internal and one external, and should minimise the chances of contracting STDs. Some 50 per cent of women who used it in trials said they preferred it to the male

4. The intra-vaginal ring. This has been developed by Organon and licenced for UK manufacture and distribution by Roussel, and could be on the market by the end of 1990. This will depend on approval from the Department of Health. The IVR is a small, soft rubber ring that releases levonorgesterol directly into the womb. It is

left in place for three weeks and removed for the fourth, only needing to be replaced every 90 days.

5. The contraceptive vaccine. These may be available in the next 20 years, researchers announced at a Contraceptive Foundation meeting in June. Among those in development is one based on synthetic antigens that will cause a woman to produce antibodies to sperm. An antidote would be given to allow her to become pregnant.

6. Implants. Non-steroidal implants are also in development. The dissolvable implants would release peptide hormones that desensitise the pituitary gland producing "lactational infertility"

Here's health!



Jeff Watson, divisional director at Nicholas

Nicholas Laboratories have always enjoyed a healthy share of the bath additives market. Now with the introduction of new Santé foam bath and shower gel, Nicholas are set to clean up and create a whole new sector.

Today's trends point towards a healthier lifestyle. Consumers are looking for the reassurance of health and gentle, efficient care from all the products they use. Now is the perfect time for Santé, the latest in a long line of bestsellers from Nicholas Laboratories.

Nicholas Laboratories can safely claim to be the major player in the bath additives market. From their traditional strengths of Radox Bath Salts, Radox Herbal Bath and Matey, the company has moved on to create and develop new markets in the shower gel area with Radox Showerfresh, and the feminine bath sector with Radox Moments. While retaining status as brand leader in its core markets, the company offers retailers the chance of increased profit opportunities with each new sector it has opened up.

With Santé, Nicholas see exciting new possibilities for the £118 million bath additives market. The last few years have been witness to a continuous boom in the shower gel sector, with sales growing up to 30 per cent year on year. And with 50 per cent of UK homes currently owning a shower, but only 25 per cent using a shower gel, this is an area with obvious growth potential. Nicholas also believe that potential for growth still exists in the £79m bath liquids market.

Bath and shower additives are still not a

regular purchase and frequency of use is low. Research among consumers has indicated that the reasons for this are twofold. On the one hand many people do not use bath foams or shower gels because they are concerned about the possibility of minor skin irritations. On the other there is a tendency among consumers to regard bath and shower additives as a "treat" purchase and not an essential shopping list item. With the introduction of Santé, consumers will be offered a unique product which will encourage regular purchase and frequent use.

The Santé brand comprises two products, a foam bath and a shower gel, both of which offer the unique benefit of helping to keep the skin healthy. Santé's special formulation, termed "dermoprotector", contains a mild antibacterial agent to protect the skin from everyday germs and is pH balanced which helps to maintain the skin's natural protective layer. Santé has a mild and gentle formulation with low levels of detergent and colour, and in keeping with current consumer concerns, the products have not been tested on animals. Lightly fragranced and with a special moisturising ingredient, Santé has been designed for frequent use by all the family.

''In tests, we found a particular demand from consumers for a product which was suitable for today's healthy lifestyle,'' reports Jeff Watson, divisional director at Nicholas. ''For family use it was very important that the product was as mild as possible, allaying consumer perceptions about 'harsh' ingredients in other bath

additives. The shower gel is even suitable for use as a shampoo. We're convinced that this brand is a guaranteed winner.''

The Spanish experience

Nicholas have good reason to feel confident. Santé is based on a dramatically successful Spanish brand (Sanex) which is owned by an overseas sister company of Nicholas. This brand stimulated a completely new sector in the home market, and almost doubled sales of bath additives. Sanex offered a slightly different formulation but was launched with the same, healthy caring proposition as Santé. From an initial share of 4 per cent at launch in 1985, the brand is now worth a staggering £15m, 20 per cent of the Spanish bath additives market.

Extensive testing preceded the UK launch of Santé, and the results augur extremely well for the brand. "The



phenomenal reactions of the 900 consumers who took part in our independent research supported our belief that Santé is on target for major success,' says Jeff Watson.

"Almost a quarter confirmed that they would buy Santé immediately, and three times as many stated an intention to repurchase after extensive home trials. Repurchase is often infrequent with bath additives, and so this result was particularly heartening. We want to make Santé an essential regular purchase for daily use—to make it as indispensable as shampoo. Research proved conclusively that consumers recognised that the benefits of Santé were unique and also welcomed the brand's broad family appeal."

Promotional package

As befits a brand with a unique positioning and unique benefits, Santé's appearance is

just as distinctive. Clean, simple graphics in blue and white, emphasise the healthy platform and heighten on-shelf impact. Both foam bath and shower gel are packed in convenient family size packs of 500ml and 200ml respectively. Both are set to retail at around £1.59, and are packed in outers of six to facilitate retailer trial.

A major promotional package is also backing the brand. Nicholas are well known for supporting their brands — they have at least 70 per cent of advertising "voice" in the bath additives market — and Santé will be no exception. A £2m spend has been earmarked to launch Santé in style, commencing with a major television campaign planned to break in the Autumn.

With the increased interest in a healthy lifestyle, bath and shower products can hope to see a year round growth. Santé is pushing back the boundaries of the market, and though there will always be some

degree of seasonality, we aim to see a lot more consistent, regular use of this brand," says Jeff Watson.

In addition to this major television presence, a full promotional package is planned. Sampling will form a major part of the strategy, with covermounts in the national women's Press, competitions, and sample sizes to aid consumer trial available in-store from September. Pharmacies will also be supported in-store with display cards, shelf strips and posters designed to bring Santé's healthy message home.

bring Santé's healthy message home.

"We believe Santé is the bath and shower brand for today's healthy lifestyle," says Jeff Watson. "It's healthy, simple, and ideal for all the family. Nicholas are strongly supporting the brand to make it as much a part of consumers' healthy lifestyles as a morning fruit juice. If Santé shows the growth rate of its continental cousin, we'll be well on our way to achieving that aim."



DHADMACY &

Helping a failing heart

David Webb, staff pharmacist clinical services, The London Hospital, and Robert Horne, principal pharmacist/lecturer in clinical pharmacy, Brighton Clinical Pharmacy Unit, look at the management of heart failure.

In simple terms, heart failure is the inability of the heart to pump sufficient blood to meet the oxygen and nutrient needs of the tissues. Heart failure is not a disease itself, but a collection of signs and symptoms produced by inadequate ventricular function.

High output heart failure (HOHF)

Here the body is making unreasonable demands on the heart for the supply of blood. The underlying problem is not an intrinsic defect in cardiac function but a failure of the heart to satisfy excessive tissue requirements. This is observed in thyrotoxicosis, due to increased tissue metabolic rate, and anaemia, where the oxygen carrying capacity of the blood is reduced.

In these circumstances treatment is geared to correcting the causative pathology.

Low output heart failure (LOHF)

This is much more common than HOHF and is characterised by an inability of the heart to pump the blood from its chambers efficiently. As a result, vessels which empty into those chambers become congested with blood. Diminished ventricular function reduces cardiac output to the point where it is insufficient for the body's needs, particularly during exercise.

Cardiac output is governed by the rate of cardiac contraction and the stroke volume; that is, the amount of blood ejected per beat. The stroke volume is dependent on three factors:

1. The filling pressure of the ventricle (the preload) which determines the degree of stretch of myocardial fibres and, as a consequence, the strength of cardiac contraction (Frank-Starling Law).

PRELOAD

CONTRACTILITY

AFTERLOAD

Pulmonary circuit

Mitral valve

LEFT ATRIUM

Aortic valve

2. The contractility of the myocardium.

3. The pressure against which the heart has to pump (the afterload).

The relationship of these factors is illustrated in figure 1.

Pathophysiology of LOHF

The patient's initial signs and symptoms are determined by which ventricle fails first (figure 2). Right ventricular impairment produces congestion in the venous system and results in engorgement of the liver and the development of peripheral oedema.

Left ventricular failure (LVF) leads to both a decrease in blood supply to the tissues and to congestion in the pulmonary circulation. Distension of the pulmonary vessels impairs lung compliance and causes breathlessness. When LVF is severe, the resultant pulmonary oedema aggravates respiratory

function further.

Failure of one side of the heart normally compromises the function of both ventricles. Patients with congestive heart failure have features of both left and right sided dysfunction.

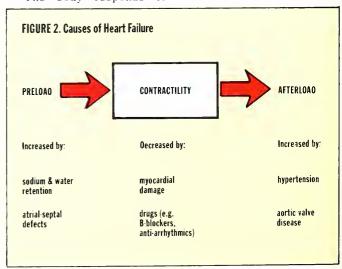
The body responds to

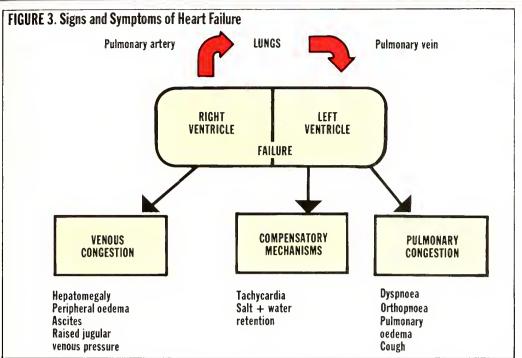
ventricular failure by attempting to compensate for the decreased tissue perfusion through several mechanisms. These produce changes which may bring initial benefit, although the long term effects are usually deleterious (figure 3).

Compensatory mechanisms

Sympathetic nervous system The sympathetic nervous system responds to low cardiac output by mediating an increase in heart rate (figure 4) and vasoconstriction. This attempts to increase perfusion of the essential organs such as the brain, heart and lungs. Renin-angiotensin-aldosterone system (RAAS) Falling cardiac output, coupled with the shunting of blood away from the kidneys by vasoconstrictive mechanisms, leads to a reduction in renal perfusion. As a result, the RAAS is activated and produces an increase in blood volume by increasing sodium and water retention. Angiotensin II is also a potent vasoconstrictor (figure 5).

Cardiac dilatation Fluid retention





increases preload which stretches the ventricular muscle. Under normal circumstances this elicits a beneficial increase in the force of contraction. However, in failure the response of the heart is diminished and, if the muscle is overstretched, cardiac output can be further reduced.

Treatment of chronic heart failure

Where possible, therapy is aimed at correcting the underlying pathology. In many cases, however, this cannot be achieved and the goal is to improve quality of life through control of symptoms.

There are basically three aspects to treatment:

1. Reducing the demands on the cardiac muscle.

2. Improving myocardial contractility, and

3. Control of sodium and water retention.

Advice to the patient should encourage the adoption of eating habits which maintain optimal body weight, avoid excessive salt intake and which limit alcohol consumption. By stopping smoking and restricting physical exercise the demands made on the failing heart will be reduced. The various classes of drugs which are used in the management of chronic heart failure are diuretics, digoxin, angiotensin converting enzyme inhibitors and vasodilators.

Diuretics Pationals for us

Rationale for use

Diuretics increase the excretion of sodium and water in the urine. This leads to a reduction in blood volume, and hence a decrease in

preload, and encourages the mobilisation of oedema fluid from the tissues back into the circulation. The most frequently used diuretics are drawn from three groups: the thiazides, bendrofluazide, hydrochlorothiazide and cyclopenthiazide; the loop diuretics, frusemide and bumetanide; and the potassiumsparing diuretics, amiloride, triamterene and spironolactone.

Current place in therapy

In mild heart failure, treatment is usually initiated with a thiazide. Diuresis begins 1-2 hours after

Table 1 Adverse effects of loop and thiazide diuretics

Decreased plasma potassium (hypokalaemia)

Decreased plasma sodium (hyponatraemia)

Increased plasma urate (hyperuricaemia)

Decreased blood volume

Hypotension

Metabolic alkalosis

Diabetes mellitus

administration and persists for longer than is observed with loop diuretics. However, the maximum response to thiazides is obtained with relatively small doses (''low ceiling'') so that increasing the dosage serves only to encourage the appearance of side effects (table 1). Thiazides are specifically implicated in the development of impotence and elevation of blood lipid levels.

Severe heart failure requires the introduction of the potent loop diuretics frusemide or bumetanide. These are rapidly acting drugs whose effects are not limited by a low ceiling and which are capable of inducing diuresis even in patients with poor renal function. Adverse drug reactions include ototoxicity and, ironically, nephrotoxicity. The combination of a loop with a thiazide or thiazide-type diuretic (for example, metolazone) produces a profound diuresis.

Monitoring points

1. Electrolyte disturbances. Both thiazide and loop diuretics promote potassium loss in the urine. This may lead to a reduction in the plasma potassium concentration (hypokalaemia) which can predispose to the development of arrhythmias.

2. Potassium supplements. The effectiveness of oral potassium supplements (Slow-K, Sando-K, etc) is limited by both their low potassium content per tablet and the high incidence of gastric intolerance associated with their use.

3. Potassium-sparing diuretics. . Amiloride, triamterene and

spironolactone are attractive alternatives to oral potassium supplements. Although only weak diuretics, they are able to prevent hypokalaemia when used in combination with loop agents and thiazides. Spironolactone, an aldosterone antagonist, will counter the hyperactivity of the renin-angiotensin-aldosterone system in LOHF, but may enhance the effects of digoxin therapy. Anti-androgenic side effects can occur on long term treatment.

Drug interactions

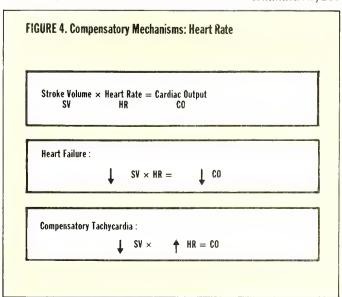
Drugs which blunt the response to heart failure therapies are discussed under vasodilators. Both thiazide and loop diuretics may antagonise the effects of oral hypoglycaemics. Thiazides are the worst offenders, however, for reducing lithium excretion in patients receiving lithium salts. Diuretic-induced hypokalaemia increases the toxicity of antiarrhythmics such as amiodarone and the cardiac glycosides.

DigoxinRationale for use

By slowing the heart rate in the presence of atrial fibrillation, digoxin improves ventricular performance. It also possesses weak inotropic activity.

Current place in therapy

The unique ability of digoxin to increase the strength of cardiac contraction while slowing the rate has ensured its continued use in treatment. Digoxin is clearly indicated for the treatment of heart failure with atrial fibrillation. Use for heart failure associated with normal (sinus) rhythm is more controversial because of its potential toxicity and the observation in some cases that digoxin therapy may be stopped without deterioration of symptoms. Indeed there is speculation that many elderly continued on p241



PHARW CYRE

patients may be receiving digoxin unnecessarily and that they would be adequately controlled with just diuretics and/or ACE inhibitors.

Monitoring points

1. Serum digoxin concentrations. Maintaining digoxin levels within the therapeutic range ensures maximal benefit with minimal toxicity for most patients, most of the time. However, levels should be interpreted in the light of the patient's clinical response to the drug. Several factors can increase the sensitivity of the myocardium to digoxin (for example, high serum calcium levels. hypokalaemia, hypothyroidism) and may result in signs of toxicity within the therapeutic range. Table 2 indicates when it is desirable to monitor levels.

Table 2. When serum digoxin monitoring is indicated

Unexplained lack of effect Interacting drug started or stopped

Before increasing the dose Symptoms of digoxin toxicity To confirm compliance

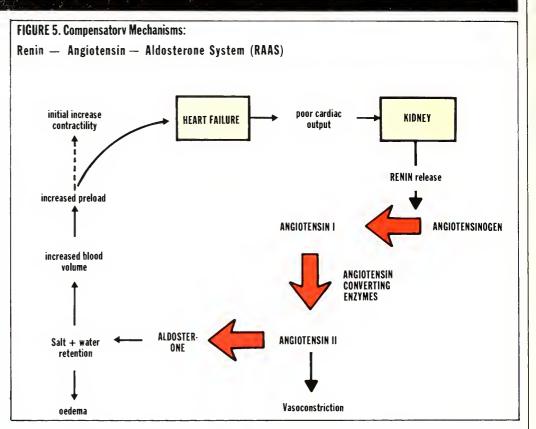


Table 3. Digoxin-drug interactions			
Drug	Effect on digoxin		
Amiodarone	Rapid increase in serum level: halve dose of digoxin		
Verapamil	Increased digoxin levels		
Erythromycin	Increased digoxin levels		
Spironolactone	Increased digoxin effect		
Quinine	Large increase in serum level: halve dose of digoxin		

- 2. Individualising the dose. Renal function is the major determinant of digoxin handling by the body and doses should be carefully titrated to the patient's requirements. An elderly patient is likely to respond to 62.5 or 125 micrograms daily.
- **3. Signs of toxicity.** These are illustrated in figure 6. Although mild nausea can occur in the

absence of frank toxicity, a patient who complains of nausea, diarrhoea or "feeling funny" should be investigated.

4. Potassium-depleting diuretics. Hypokalaemia can result in fatal digoxin toxicity.

Drug interactions

The combination of digoxin with drugs that have the potential for interaction is sometimes necessary (for example, verapamil, amiodarone). However, therapy is usually initiated in hospital where the patient can be carefully monitored (table 3).

ACE-inhibitors

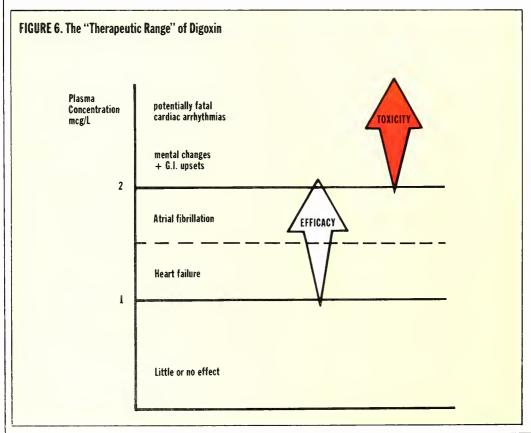
Rationale for use

Angiotensin II, produced from inactive precursors in the plasma, enhances the vascular tone and increases cardiac workload by several mechanisms (figure 5). By inhibiting the converting enzyme responsible for the formation of angiotensin II, ACE-inhibitors alter some of the neurohumoral effects which worsen heart failure. Vasodilator activity produces an improvement in cardiac performance.

Current place in therapy

ACE-inhibitors are regarded by many as the vasodilators of first choice in the treatment of heart failure. At present they are recommended for patients who remain symptomatic following the introduction of diuretics (and digoxin, if this is appropriate). There is little evidence that one

continued on p242





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member of the ACE-inhibitor group is more efficacious, or less toxic, than another and, if current dose recommendations are followed, they seem to be well tolerated by most patients. The longer half-lives of enalapril, lisinopril and quinapril do allow once daily dosing although it is debatable whether this encourages better compliance than twice daily captopril. Unfortunately, drugs exhibiting a lengthy duration of action may accumulate in the elderly patient.

Monitoring points

1. First dose hypotension (table 4). This is dangerous. Blood flow to vital organs is reduced which may cause cardiac, neurological and acute renal impairment. It is therefore recommended that therapy is started in hospital where the risk of hypotension is reduced by starting at low doses and by stopping, or reducing, the dose of diuretic for a few days beforehand.

2. Renal function. ACE-inhibitors may occasionally cause renal impairment (table 5). Renal function should be monitored before and during therapy.

3. Electrolyte disturbances. ACEinhibitors promote potassium retention by the kidneys which

Table 4. ACE-inhibitor first dose hypotension-risk factors

Old age

Presence of cardiac failure Treatment with diuretics Treatment with antihypertensives

Table 5. ACE-inhibitor renal impairment risk factors

Old age

Pre-existing renal impairment Bilateral renal artery stenosis Concomitant use of nephrotoxic drugs eg NSAIDs, penicillamine

may lead to serious hyperkalaemia if patients are also taking potassium-sparing diuretics or potassium supplements.

4. Immune function. Blood dyscrasias such as neutropenia have been reported, but are rare. The effect has been linked to the sulphydryl (-SH) group of captopril. Enalapril and the newer agents lack this moiety and close monitoring of the neutrophil count does not appear to be essential. Patients complaining of repeated sore throats should be referred to their

5. Angioedema. Acute oedema of the face, lips and tongue is rare but can be fatal if respiration is obstructed. Emergency treatment with adrenaline and intubation may be necessary.

Drug interactions

Excretion of lithium is reduced by enalapril, and possibly other ACEinhibitors, necessitating monitoring of serum lithium levels. The renal excretion of captopril is itself reduced by probenecid. Drugs that enhance hypotension or diminish the beneficial effects are discussed under vasodilators.

Vasodilators

Rationale for use

Dilatation of the venous or arterial systems, or both, reduces the demands made on the failing heart. Venodilators decrease the preload and are of use in pulmonary congestion, whereas arteriolar vasodilators bring about improvement in cardiac output by lowering the afterload. Calcium channel blockers, for example nifedipine, fall into the latter category but are not generally employed because of their potentially negative inotropic effect. Vasodilator therapy is accompanied by adverse effects which typically include headache, postural hypotension tachycardia.

Current place in therapy

Classification of vasodilators in terms of their predominant site of action is indicated in table 6. The nitrates are venodilators which are widely used, as either isosorbide mono- or dinitrate, to alleviate congestive symptoms. Unfortunately, tolerance to the therapeutic activity of nitrates is thought to occur on long term The treatment. arterial vasodilator hydralazine is now a relatively less popular option in the management of heart failure. Prazosin, an adrenoreceptor antagonist, blocks the vasoconstrictive action of noradrenaline and produces an indirect arterial and venous vasodilatation. However, its activity in some patients is only short-lived.

Monitoring points

1. Hydralazine. Hydralazine can promote sodium and water retention which necessitates additional diuretic therapy. Arterial dilatation also runs the risk of dropping systemic blood pressure to such an extent that coronary perfusion is diminished and the patient rendered susceptible to angina.

2. Venodilators. Since the diseased heart requires a higher than normal filling pressure to maintain its output, excessive reduction in preload with nitrates may actually compromise cardiac performance.

3. First dose hypotension. Prazosin, in particular, is liable to cause collapse due to hypotension and should be introduced with caution into regimes containing diuretics.

Drug interactions

Alcohol, hypnotics, antidepressants, levodopa and the other antihypertensives are capable of increasing the

l'able 6. Classificatio	Table 6. Classification of vasodilators			
Venous	Arterial	Mixed		
GTN Isosorbide mono and dinitrate	Hydralazine ACE-inhibitors Calcium channel antagonists	Prazosin		

hypotensive effects of all vasodilators. Non steroidal antiinflammatory drugs, corticosteroids, carbenoloxone and the oestrogens antagonise the therapeutic actions of diuretics, ACE-inhibitors and vasodilators.

Xamoterol

This new partial beta agonist may produce a small improvement in the symptoms of mild heart failure. Xamoterol treatment should be started only in hospitals and must be avoided in patients with moderate to severe chronic heart failure or those with obstructive airways disease. Its place in therapy is unclear at present, as most mild cases tend to respond to diuretics alone.

Monitoring points

Xamoterol should not be used if the patient:

1. Needs doses of loop diuretic in excess of 40mg frusemide (or equivalent) daily,

Needs treatment with an ACE-inhibitor,

3. Has pulmonary oedema,

4. Has hypotension or resting tachycardia, or

5. Is short of breath or fatigued at

In general, patients taking xamoterol require careful monitoring. The drug should be stopped if symptoms deteriorate.

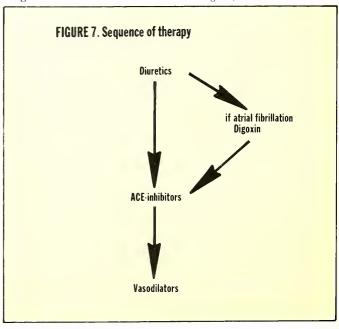
Summary

The usual sequence in which different classes of drugs are introduced to the patient with chronic heart failure is illustrated in figure 7.

Suggested reading

Kay, E.A., Congestive cardiac failure, Brit J Pharmacy Practice, 1989, 11, 150-3. Hudson, S., Cardiac failure, Pharm J, 1987,

Hudson, S., Cardiac tailure, Pnarm J., 1961, 239, 268-70.
Macleod, J., "Davidson's Principles & Practice of Medicine" 14th ed, Edinburgh: Churchill Livingstone, 1986.
Gillies, H.C., Rogers, H.J., Spector, R.G., Trounce, J.R., "A Textbook of Clinical Pharmacology" 2nd ed, London: Hodder and Steadyton, 1986. and Stoughton, 1986.



The reality of the pay imposition

The reality of what the imposition of a 7.5 per cent increase in remuneration really represents will only be revealed fully when contractors see their accounts for the current financial year in mid-1991. Only then will pharmacists fully appreciate how meaningless are the Department of Health's criteria of recruitment, retention and motivation. Meaningless to pharmacists, but for the DoH the sheer vagueness of these "criteria" is a perfect vehicle for applying an arbitrary limit to our remuneration without taking into account any of the costs necessarily incurred in providing a pharmaceutical

If negotiations between PSNC and the Department are to retain any credibility, realistic criteria must be negotiated without further delay, and realistic timescales for implementation of new services must be introduced. Otherwise, the criteria that community pharmacists will themselves begin to apply will be those of regret, recrimination, and malaise.

Of primary concern should be the quality of service to patients, provision of new services, and participation in health promotion. High quality services cannot be provided on a shoestring. If the Department wants to implement practice audits in the future, it should look first to its own role as paymaster. If a realistic payment cannot be negotiated, if the imposition of Treasury imposed limits is the Department's only response to pharmacists' increased overheads and aspirations, the result will be attrition and a second rate service for second rate pay!

J.M. Donoghue Liverpool

Scottish ESP payments

I read with great interest about the remuneration being offered to my colleagues in England and Wales (*C&D* July 21). May I, through the courtesy of your columns, ask: "Does anyone know why our colleagues South of the Border enjoy almost double the maximum monthly essential small pharmacy allowance of £1,450 compared to the maximum of £770 received by Scottish contractors?"

Do our colleagues elsewhere have higher costs? I don't think so. Our wholesaler charges the same price for our medicines no matter what corner of the UK we reside! Are there any other Scottish contractors out there, in receipt of the essential small pharmacy allowance, who are wondering why our negotiators failed to achieve such a payment for Scottish contractors in the essential small pharmacy scheme?

V. Dawes Rothes, Moray

PSNI COUNCIL

Dr Terry Maguire is to represent the Pharmaceutical Society of Northern Ireland's Council on the Royal Pharmaceutical Society's Working Group on distance learning. Council decided this at their last meeting at which Dr Maguire reported on a meeting of the Group, formed to define the core syllabus.

Council agreed that he should also act as an observer at meetings of the Post Graduate Education and Training subcommittee, London. Dr Maguire was also renominated to represent Council for a further four years on the PQET subcommittee, NI.

Council president Mr R.G.P. McMullan welcomed Professor Alain Li Wan Po, who has been nominated as Queen's University's representative, and congratulated Dr J.D.G. O'Hare on receiving his PhD.

Two students, Elizabeth Ada

Ruddell, of 177 Princess Way, Portadown, and Karen Mary Dolan, of 46 Derrychard Drive, Enniskillen, co Fermangh, were accepted for registration as pharmaceutical chemists. The application of Siobhan Taggart, of 104 Bredan Road, Drumquin, co Tyrone, was accepted under the reciprocal agreement with the RPSGB.

Reports were presented by Dr O'Hare on a meeting of the Ethical and Law Committee, and by Mr T.G. Hannawin on the Finance and House Committee. Mr Hannawin said that the transfer of monies to the Ulster Bank was well advanced, and hoped they would soon be in higher interest accounts. Professor T.D. Burns reported on the EC directive on homoeopathic medicinal products.

The next meeting of Council was arranged for September 20, and the annual meeting planned for September 27.

Discounts from TVM

It is understandable that Xrayser (July 28) should feel aggrieved at ordering over \$200 worth of ostomy products and receiving no discount. The prescription may have cost him \$20 to dispense on that occasion, but it was due to his usual supplier being out of stock.

At Thames Valley Medical we provide a fully comprehensive range of ostomy and incontinence products, indeed Xrayser complimented us on this point, and we will continue to offer a service to all retail pharmacists whatever their requirements may be. As a specialist wholesaler we cannot survive from the proceeds of the occasional small order and give discounts.

TVM started to offer competitive discount rates to all retail pharmacists from June 1, provided that regular business is placed. Our sales force is currently visiting all pharmacies and offering this new package, but anyone who would like more information should contact our head office.

Recently TVM celebrated its 21st year in the business of supplying ostomy and incontinence products to retail pharmacy and with the improved discount facilities now available we look forward to the future with renewed anticipation of increased support.

N.P.L. Keane National sales manager, TVM

Try us...

I refer to Xrayser's **Topical Reflections** (C&D July 28), concerning the lack of discount offered by Thames Valley Medical. If he had ordered his ostomy supplies from this

company he would have qualified for at least £16 in discount. We stock all Drug Tariff items of ostomy and incontinence appliances and will be pleased to send our terms of trade to any of your readers on request.

Peter Nuttall

Managing director, North West Ostomy Suppliers Ltd

A 'pressing' case

There are several cases of Essex pharmacists being "pressed" into using particular branded generics. Essex Local Pharmaceutical Committee has taken the following action:

1. We have raised the matter once (and will do so again) with the Essex Family Practitioner Committee's medical advisor.

2. We have reported the matter to the Pharmaceutical Services Negotiating Committee and asked for any help.

3. We have raised the matter with the Association of the British Pharmaceutical Industry. While the company in question is not a member we feel that the Association, as the representative body of the industry, should have a view and can, perhaps, bring some pressure to bear.

4. Last, but by no means least, we have raised the matter with Jerry Hayes MP (Harlow, Con) who is extremely interested in health matters. He "views the matter with some concern" and has taken it up with the Department of Health.

My committee is anxious to hear of any other cases where branded generics are being promoted in our county but are not available through normal channels.

Miall E. James Secretary, Essex LPC

For all scaly scalp conditions

- ✓ A lightly fragranced formula with the strength of coal tar.
- ✓ Does not stain the skin, clothes or bath.
- ✓ Leaves the hair shiny and easy to manage.



The effective scalp treatment in a cosmetic shampoo.



Harris merge for US gains

Pharmaceuticals are to merge with Ivax Corporation of Miami. Shareholders of Harris Pharmaceuticals will receive 6.25m shares in Ivax, currently trading at around \$12 each, for the Harris shares.

Cyríl Beck contínues as chairman of Harris and Nigel Norton remains as managing director; both men, along with Harris director Isaac Kaye, become members of the Ivax

Corporation board.

Harris view the merger as a step to achieve significant share of the American market for some of its product range, particularly for its respiratory inhalation products. They also see potential for a number of Ivax products both for the UK and EC markets, especially from the company's pharmaceutical division.

Harris Pharmaceuticals, with its subsidiary companies H.N. Norton, Becpharm, Waterford Pharmaceuticals, and Harris (Antibiotics) had sales of £40m earning pre-tax profits of £3.2m in the year to March 31.

Birex goes **Swiss**

A major shareholding has been acquired in Birex Pharmaceuticals Ltd by the Swiss company, Helsinn Holdings SA

Birex manufacture a range of pharmaceutical products in Blackrock, co Dublin, Eire, and have a current turnover of about £2 million. They export to the UK, France and Canada.

The new company, Helsinn Birex Pharmaceuticals Ltd, aims to increase its presence in the Irish market with products from both original companies. Helsinn also plan to use Ireland as a stepping stone into other EEC markets, particularly the UK. John Burns will remain as managing director

Pharmoney offers business loans

Cheaper money is currently on offer for pharmacists who want to borrow either to buy or develop pharmacy businesses. Jardine Financial Services, which operates the Pharmoney scheme for NPA members, is offering long terminterest with two year fixed rates of 15 per cent on secured loans and 15.5 per cent on unsecured loans. "This is the first time a fixed rate has been made available,'' said Colin Mudge Jardine Financial Services said Colin Mudge, mortgage manager.

The previous scheme to fund pharmacy purchases offered variable interest rates, currently standing at around 17 per cent and 17.5 per cent respectively. However, Jardines emphasise that the new scheme can be used refinance existing arrangements, either of their own or from other finance houses.

At the end of the two years the loans revert to the prevailing variable interest rates at the time, or to a newly negotiated rate.

Close to £5m is available to be

lent under these new terms, and as the fixed rate loans take effect on December 1 pharmacists need to contact Jardines by early November to take advantage of

Colin Mudge points to three additional plus points: no personal guarantees are required from the pharmacist; there are no recall clauses; there are no review clauses for the terms of the loan to be renegotiated.

A minimum of £15,001 must be borrowed under the terms of the loan, keeping it outside consumer credit regulations, while a maximum of £150,000 is available for unsecured loans. In theory there is no maximum for the secured loans. 100 per cent loans are available which include goodwill, stock and fittings.

Additional benefits include deferral of interest payments for up to three months and the opportunity for bridging finance related to residential purchases. The arrangement fee is £100 which can be refundable

LIG consolidates worldwide

With the world condom market continuing to grow at about 5 per cent a year, the London International Group have restructured their worldwide condom manufacturing operations

All manufacturing has been consolidated into four plants based in the Chingford, UK; South Carolina, USA; Bologna, Italy; and Barcelona, Spain. Individual factories are able to produce condoms to meet or exceed all worldwide standards.

According to the company's annual report, the UK condom market grew by about 3 per cent last year, but on mainland Europe the figure was higher at 8 per cent. London International's condom market shares increased significantly in Spain and France,

with some gains in Italy.

In the UK, aggressive marketing programmes for Buttercup and Galloways cough syrups contributed towards the strengthening of the company's lead in this market. The Eucryl range of oral hygiene products was relaunched at the end of the vear, directly targeted at the smoker's market.

Market share gains were reported in all areas of their Colourcare operations.

International's London photoprocessing coverage in the UK was consolidated with the acquisition of a small processor in Scotland and the building of a new laboratory in Walsall, West Midlands. The company now also supplies photographs to estate

P&G switch Pampers to Trafford Park

Procter & Gamble hope to switch a substantial proportion of their Pampers disposable nappy production for the UK market from West Germany to a purpose built plant at their Trafford Park factory in Manchester. The plant, which is due for completion next year, will provide about 250 jobs.

The facility is to be built on an undeveloped 23 acre site within the company's existing Trafford

Park site.
The Trafford Park factory, which has been producing goods since 1934, currently employs some 600 people and manufactures a range of household and personal care products, including Flash, Ariel, Lenor, Head & Shoulders shampoo and Vidal Sassoon haircare products.

■ The US Justice Department has threatened to block Procter & Gamble's plans to market Rhône-Poulenc Rorer Inc's Maalox antacid in the USA because the past violates antitrust laws, according to the Wall Street

Journal.

marketing agreement, if it goes through, would make P&G the biggest participant in the US over the counter stomach remedies market and could, according to the Department's antitrust division, 'substantially lessen compet-

The National Pharmaceutical Association's phone number has been amended to 0727 832161 due to modernisation of the St Albans exchange. PMI (0727 44344) and fax numbers (0727 40858) are unchanged.

Cheque card fraud rose by \$1m in 1989, prompting the cheque card committee of the Association for Payment Clearing Services to call for retailers to be doubly vigilant during the Summer months. This is the first Summer when higher limit cheque cards have been avaílable.

AAH buy more outlets

AAH's retail pharmacy division ooks set for market expansion. The company currently owns 113 pharmacy premises and have their eves on a number more. Several ourchases are currently being negotiated with solicitors.

Of their existing properties, 57 ire managed and 56 are ranchised. But they are in the process of converting all their etail pharmacies to their

ranchise scheme

This week AAH announced he acquisition of a pharmacy in Bristol. The initial consideration in espect of D.F. Brint (Portsihead) Ltd, of Victoria Square, Portishead, Bristol, 392,000, of which £200,000 has been satisfied by the issue of 52,770 25p ordinary shares of AAH and £192,500 was paid in cash. A sum of up to £50,000 will be payable when the net asset value is confirmed.

The Portishead pharmacy is 500sq ft in size and planning permission has been obtained for an extension which AAH intend to

have constructed.

CBI: negative views

Some negative messages come out of the pharmaceuticals and consumer chemicals section of the latest Confederation of British I<mark>ndustry industrial trends survey.</mark>

Compared with four months earlier, 18 per cent of respondents were less optimistic about the general business situation in the industry and 10 per cent were less happy about export prospects for the next year.

Just over half of the companies in the survey recorded their present level of output was below capacity and total order books in 41 per cent of companies were below normal. Four fifths predicted that orders or sales were likely to limit their output over the next four months.



Pictured (from left to right) at the sod-turning ceremony marking the start of the first phase of Antigen Pharmaceutical's £8.5 million expansion programme in the Irish Republic are: Michael Smith TD, Irish Science and Technology Minister; Michael Lowry TD; John Egan, chairman of North Tipperary County Council; George J.J. Fasenfeld, chairman, Antigen Pharmaceuticals; Conal F. Boyle, chief executive, Antigen Pharmaceuticals; Senator John Ryan and Paul Sheane, industry group director of Shannon Development.

Colourcare's £5m Park **Royal investment**

Colourcare International have completed the first stage of a £5m investment programme to install continuous process D&P in their UK laboratories. The first of these has been commissioned at the company's Park Royal site and is capable of developing an processing up to 1,000 35mm films an hour.

The investment programme is taking place against a background of falling volumes of films processsed in the UK market. D&P is a £360m industry and since the war in the UK it has achieved growth by volume of around 5 per cent a year, "but we are expecting the UK market in volume terms to decline by 5 per cent over last year, Colourcare director and general manager Andrew Parrish.

The glory glory days of the 1960s and 70s have gone forever and we are now in a much more competative market. Our strategy will be to out invest our competition.

The Maxilab system installed at the company's Park Royal

laboratories takes existing plant used for traditional batch processing and redeploys it as part of a continuous process line.
"Now we have a system

which we can run on a continuous basis; it needs less adjustment, there is no need to stop and start the machines, and there are real benefits to quality. "The company have already ordered a further three Maxilab systems for other UK Colourcare Laboratories and will buy three more in twelve months time.

Apart from the quality arguments, the Maxilabs will help the company push down costs. The continuous flow system at Park Royal can be operated by just eight people, working flexibly, against the 32 operators necessary for the batch processing it replaced.

Change at the top for Evans

Evans have made senior management changes "for the effective management of the business".

Evans Healthcare's new managing director Steve Harris is responsible for branded medicines and biologicals. Assuming next week's extraordinary meeting of parent Medeva ratifies the purchase of Kerfoot, that will be merged with the Evans generics business and run as another,

Mr Harris joins Evans from a San Diego-based high-tech company, where he was involved in setting up a European subsidiary. He formerly worked for Reckitt & Colman. Steve Mountain and Mark Watson, who were managing directors of the branded and biologicals businesses, have left.

Medeva have sold their Cambridge Life Sciences subsidiary for £1.3m in cash to the German company Byk. At December 31, 1989 CLS had net assets of £776,000 and incurred a loss before tax of \$800,000.

COMING EVENTS

Ag and Vet weekend

The Royal Pharmaceutical Society's Agricultural and Veterinary Group's annual weekend meeting will take place this year in Bath on October 13-14 at Pratt's Hotel. The theme for the weekend will be "Zoonoses and foodborne zoonoses". Details from The Ag and Vet Pharmacists Group at the Society's headquarters on 071-735 9141.

Advance Information

Public Health Alliance. "1992 — The people's health: Who's in charge?". One day conference at Glasgow City Chambers on September 1 starting at 10.30am. Speakers to include MEPs and WHO experts. Cost £35 (PHA members)

\$50 (non-members). Details from PHA on 021-235 3698

French Federation for the perfumery, beauty products and toiletries industry. The 4th International Perfumery Symposium at the CNIT in Paris on October 14-15. Accompanied by the 'Hymn to perfume" exhibition. Details from the Federation at 8 Place du General Catroux, 75017 Paris, Tel: (33) 147 66

Verdict Research, "International retailing — the British view", a one day conference at the Queen Elizabeth Il Conference Centre, London on October 17. Cost to include lunch and tea, \$295 plus VAT. Details from Deborah Grant on 071-404 5042

Independent Healthcare Association. Annual conference at the Queen Elizabeth II Conference Centre, London on October 18. Topics to include medical and nursing audit, nursing education, community care and psychiatric care. Information from Jean Howard, IIIA, Africa House, 64-78 Kingsway, London WC2B 6BD. Tel: 071-430 0537.

Post to Classified Advertisements, Chemist & Druggist, Benn Retail Publications, Sovereign Way, Tonbridge, Kent TN9 1RW. Tel Tonbridge (0732) 364422. Telex 95132. Fax: (0732) 361534 Ring Matthew Corse Ext 2472 for further information

Publication date Every Saturday

Headings All advertisements appear under appropriate headings **Copy date** 4pm Tuesday prior to publication date.

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Boots manager Roger Odd to follow Rhodes at Society



Roger Odd, who has made his career as a manager at Boots, is to succeed Bruce Rhodes as head of the practice division at the Royal Pharmaceutical Society. Mr Odd will be taking up his post in mid-November and Mr Rhodes is to retire in January next year.

Mr Odd told *C&D* this week that he saw the post as a challenge within the profession and he looked forward to taking it up.

Mr Odd has been prominent in pharmaceutical affairs. From 1977-80 he was a member of the Society's Council and prior to that, for two years had been a member of the Society's community pharmacy subcommittee. He has been a member of the College of Pharmacy Practice since 1975 and is currently an associate examiner for the College.

He has been a member of several regional committees of the Society and is currently regional communications officer for Yorkshire. In that capacity he has appeared regularly on radio and television and communicated with the Press on pharmaceutical issues.

Since the departure of the Society's director of public relations last year, Bruce Rhodes has been 'o-ordinating relations with the' ess. It is expected that Mr Odd will continue in this role,

with the public relations manager, who is currently being recruited, looking at the public relations' requirements of the Society. Senior pharmacists will continue to act as spokesmen appearing on television and radio.

Mr Odd registered as a pharmacist in 1967 and at Boots he has had managerial posts in Margate, Cliftonville, Oxford and Aylesbury, before moving to his current position as manager of the main branch in Hull.

He was president of the Portsmouth Polytechnic Students Union for two years in the 1960s and then general secretary of the British Pharmaceutical Students Association. He has served on the Humberside Local Pharmaceutical Committee and the Buckinghamshire Family Practitioner Committee.

The Society's practice division deals with any matter concerning the practice of pharmacy in all its facets.

Linstead and Galen awards

The Royal Pharmaceutical Society's Council approved the award of the 1990 Sir Hugh Linstead community pharmacy practice research fellowship to Mr Peter Marshall for a project entitled "Generic prescribing: Doctors" attitudes and an international comparison of generic quality, price and policy". The award will be worth \$10,000.

The 1990 Galen award is to go to Dr Clive Edwards for a project entitled "An investigation of the influence of patient age on drug costs: Validation of the prescribing unit in general practice". The award will be worth £6,000.

C&D's new Technical Editor

Charlotte Coker has been promoted to Technical Editor.

She joined the magazine in February 1989 as a Reporter. Prior to this Charlotte worked as a locum, and in various managerial positions at Underwoods Cash Chemists.

Mrs Coker (née Lynch-Shyllon) graduated from Brighton



Polytechnic, did her preregistration training in a London community pharmacy, and registered in July 1985.

Historic find in Forfar

Extensions to a Forfar pharmacy have resulted in the discovery of a commemorative stone dating back to the year 1634.

Following AAH's purchase of the pharmacy in Castle Street, it was decided to extend the premises by purchasing some land and an old stable at the rear of the shop. During the demolition of an outside toilet, a stone plaque was found in the roof space.

Pharmacy manager David Gill was alerted and contacted the local museum. He thoughtfully took photographs in case the stone was damaged in any way when moved.

The stone which measures

4ft × 2ft, bears the date 1634, the name Elizabeth Paterson, a crest incorporating flowers and birds, and a latin motto. The inscription "Domine est initium sapientiae" has been translated as "learning is the beginning of wisdom", and has caused speculation that the site was originally a school.

The find is particularly important as the date, 1634, predates local written records which were destroyed by Cromwell in 1660, said Mr Gill. At one time it was hoped to build the plaque into the extension, but as this is impractical, the stone is being donated to the local museum.

APPOINTMENTS

Bayer UK have appointed Martin Newson as finance controller and company secretary, he was previously company secretary. Some of his previous responsibilities have been assumed by Peter Atkinson, the new corporate services manager. In addition, Richard Baines has been upgraded to group treasurer and Steve Waite is the new group accountant. These latter changes follow the integration of accounting of certain operations within the Bayer Group including that of Bayer Diagnostics UK Ltd.

The Surgical Appliance Manufacturers' Association has appointed Andrew Chater as its chairman. Mr Chater is marketing director of Scholl Consumer Products Ltd.

Robinson Healthcare have strengthened their marketing team with the appointment of Jane Terry, as product manager for consumer plasters. Ms Terry was formerly sales operations executive with Parfums International. She will have responsibility for marketing Fast Aid and private label brands in the grocery and pharmacy markets.

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